In increasing willingness to provide social support and outcome expectations for women with postpartum depression

Andrea L. Ruybal, M.A. and Jason T. Siegel, Ph.D.
Claremont Graduate University, Claremont, CA

Abstract

A potential means of increasing the provision of help to women with postpartum depression (PPD) was assessed across three studies. Guided by attribution theory, it was hypothesized that people would be more willing to provide social support to women with PPD if the onset and recovery of the illness was not seen as under their control. Study 1 assessed whether perceptions of PPD was due to internal causes also reported less sympathy, and more anger, toward a woman with PPD if it was associated with less willingness to provide social support. Studies 2 and 3 utilized different experimental manipulations to investigate whether changing perceptions of controllability caused changes in affect and willingness to help. Results of Study 1 supported the generalizability of attribution theory to PPD. Results of Study 2 and 3 indicated that changing perceptions of culpability influenced affect, which then influenced willingness to provide social support.

Method

Design

Study 1 – Correlational, Bootstrapped Mediations
Study 2 – Bootstrapped Mediations
- Randomized Conditions
- PPSAs, I-Control

Study 3 – Bootstrapped Mediations
- Randomized Conditions
- 3 PPSAs, I-Control

Results

Participants

Study 1 Can Attribution Theory Be Applied to PPD?

<table>
<thead>
<tr>
<th>Measure</th>
<th>Study 1</th>
<th>Study 2</th>
<th>Study 3</th>
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<tbody>
<tr>
<td>N</td>
<td>117</td>
<td>152</td>
<td>322</td>
</tr>
<tr>
<td>Age</td>
<td>35.15</td>
<td>17.71</td>
<td>33.11</td>
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<tr>
<td>Gender (male)</td>
<td>58.7%</td>
<td>41.9%</td>
<td>58.7%</td>
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<tr>
<td>Ethnicity (Caucasian)</td>
<td>86.4%</td>
<td>75.9%</td>
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<td>Education (≤ 4 year)</td>
<td>52.2%</td>
<td>52.8%</td>
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Measures

All items were presented on a 7-point Likert scale (Segel et al., 2012).

1) Controllability
   - Onset Internal
   - Offset Internal
   - Onset External
   - Offset External

2) Social Support
   - Willingness to Provide Social Support (WPSS)
   - Want to talk about their private feelings, wanted someone to point out their good qualities, needed someone to tell them they were loved by others, needed advice, she felt lonely, needed someone to make them feel better
   - Social Support Outcome Expectations (SSOEs)
   - There is something I can do to help the depressed woman, there is something I can do to shorten the length of time she is depressed, there is something I can do to help her depression recovery, my help will make a positive difference, my help would be needed if she is going to get better, less help can give, less will she become

3) Affect
   - Sympathy
   - Tenderness, kindness, understanding, warmth, endearment
   - Annoyance, bothered, anger, frustration, irritation

4) Demographics
   - Age, gender, ethnicity, income

Procedure

Three surveys were posted via Mturk
- Description of PPD
- Asked participants to list a hypothetical loved one (e.g. mother, daughter, sister, roommate) who could have PPD
- Opinions about PPD, willingness to help loved one with PPD, and whether they perceived her as at fault for her current state

Discussion

Conclusions / Implications

- Attribution theory is generalizable to the PPD domain
- Proposition that loved ones are to blame for their PPD report greater anger than those who do not
- Attribution theory to the PPD domain could increase the provision of social support to woman with PPD
- Doubles as a mistargeted approach (Segel et al., 2014; Walter & Feelings, 1982)

Limitations / Future Directions

- Ethnic specific results
  - Minorities may perceive depression differently (Keaer et al., 2013)
  - Differences in rates of PPD vary greatly based on ethnicity (Connolly et al., 2013)
  - Self-report and social desirability
  - Skewed variables reduced the variance
  - Intentions do not necessarily predict future behavior (Fisher & Ajzen, 2009)
- Long-term effects of being exposed to PPD PSAs are unknown

Selected References


Andrea Ruybal@ggu.edu
Purdue Student of Social Psychology & Health Behavior Research School of Social Science, Policy, and Evaluation Division of Behavioral and Organizational Sciences

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Theory and Prior Evidence

Postpartum Depression

- Common medical complication (Sid & Winer, 2009)
- 10-15% of all child-bearing women (Keaer, 1995; Liberto, 2012)
- Low help seeking (McKerney et al., 2009)
- Negative consequences
  - Woman (Huxley et al., 2012)
  - Child (Murray & Cooper, 1997)
- Family (Rachele-Riener & Falstaff, 2003)

Attribution Theory

Introduction

Hypotheses

H1) Those who perceive the woman as responsible for the onset of PPD or not being able to overcome it, will feel more anger toward her

H2) Increased levels of anger will be associated with a reduced willingness to provide social support to a loved one with PPD; increased levels of sympathy will be associated with an increased willingness to provide social support to a loved one with PPD

H3) There will be a negative relationship between perceptions of controllability (both onset and offset controllability) and willingness to provide social support to a loved one with PPD

H4) If a person perceives a woman as not responsible for her PPD, this will indirectly increase willingness to provide social support through the affect felt toward the woman

H5) Individuals who think their help will be beneficial for the recovery of a person with PPD will be more willing to help

RQ) Afflict will mediate the relationship between controllability and SSOEs (Studies 2 and 3 only).

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