Maternal Mental Health & Infant Health Outcomes: An Intervention among Women Living with HIV and Perinatal Depression in Malawi

KRITI DEVKOTA, BA¹, Teresa R. Filipowicz, MPH², Steve Mphonda, BA³, Brian W. Pence, PhD², Angela Bengtson, PhD⁴

¹Quinnipiac University Frank H. Netter MD School of Medicine, North Haven, CT.

- ² Department of Epidemiology, University of North Carolina Gillings School of Global Public Health, Chapel Hill, NC.
- ³ University of North Carolina Project Malawi, Lilongwe, Malawi.
- ⁴ Department of Epidemiology, Emory University Rollins School of Public Health, Atlanta, GA.

Quinnipiac Frank H. Netter MD School of Medicine



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	Results			
• In Malawi, 15% of women are living with HIV (WLHIV) and up to 30% experience perinatal depression (PND) increasing	Figure 1: Fetal Loss and Infant Mortality • Miscarriage (n) • Stillbirth (n) • Infant Deaths (n) 6 • • • • • • • • • • • • • • • • • • •	Figure 2: Adverse Delivery Outcomes Usual Care (n=34) Enhanced Friendship Bench (n=39)		

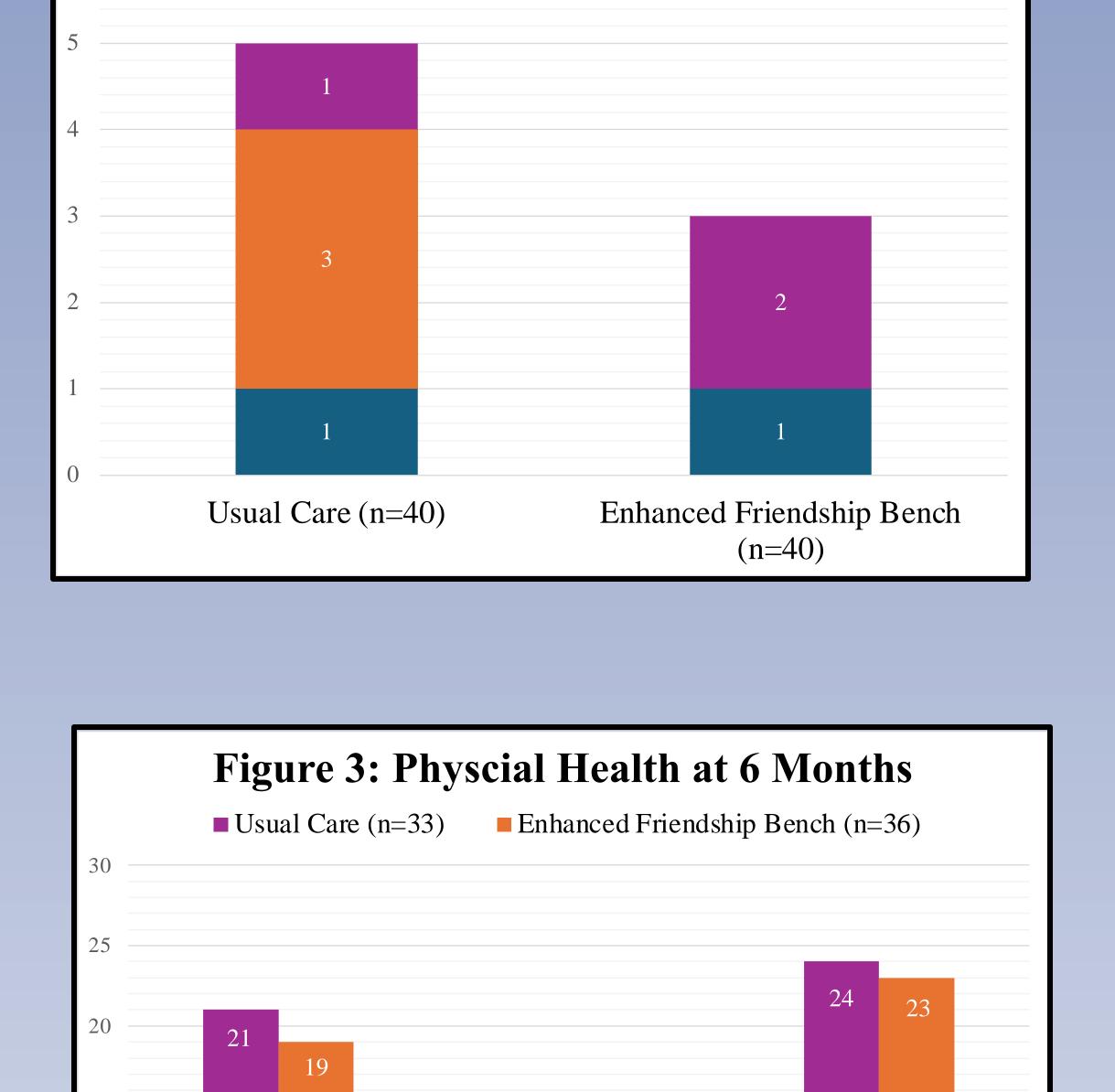
the risk for poor infant health outcomes.

This study will estimate the effect of a counseling intervention (the enhanced Friendship Bench [EFB]), on infant health outcomes.

Methods

- Study Population: pregnant WLHIV (≤ 34 weeks gestation) with depression symptoms (SRQ-20≥8)
- Study Location: Bwaila Hospital and Area 18 Health Center
- Recruitment Period: August 2020 to August 2021
- **Randomization:** Participants (n=80) randomly assigned to study arm.

• EFB: 4 prenatal and 2 postnatal counseling sessions



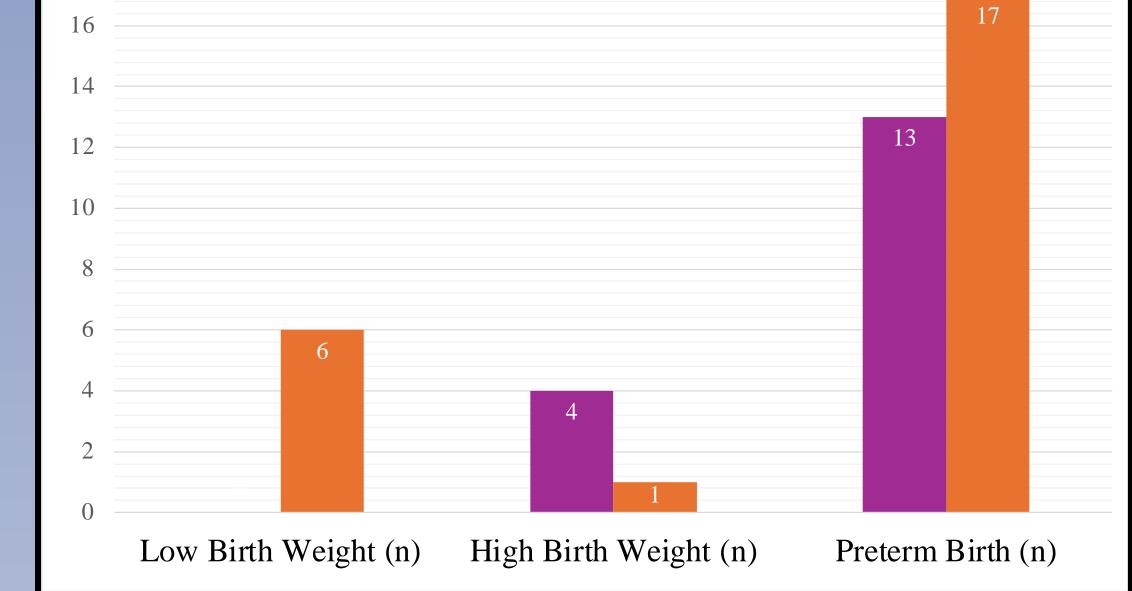


Table 1: Infant Delivery Outcomes at Birth				
	Usual Care (n=34)	Enhanced Friendship Bench (n=39)		
			Mean Difference	
	Mean (SD)		(95% CI)	
Birthweight (grams)	3,224 (465)	2,925 (550)	-298(-534,-62)	
Gestational Age (weeks)	38 (1.56)	37 (2.48)	-0.99(-1.95,-0.02)	
*Reported results are among singleton livebirths only				

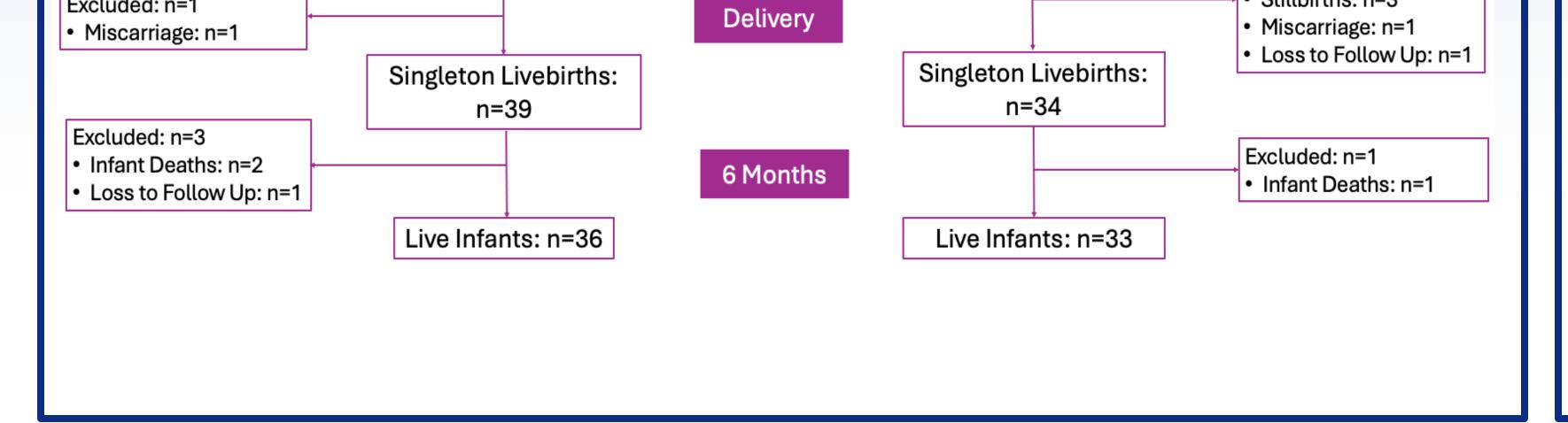
Table 2: Infant Health Outcomes at 6 Months

- **Usual Care:** evaluation, brief counseling, education, and/or referral
- Analysis: Mean differences and 95% confidence intervals were estimated via linear regression models
- **Funding**: This clinical trial (**NCT04143009**) was funded by the National Institute of Mental Health (**R34MH11680**).

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0 Infant Diarr	hea (n)	Severe Di	iarrhea (n)	Current with F	Routine
				Immunizatio	

	Usual Care (n=33)	Enhanced Friendship Bench (n=36)			
	Me	an (SD)	Mean Difference (95% CI)		
Physical Outcomes					
Weight (grams)	7,777 (961)	7,690 (849)	-87(-534,360)		
Height(cm)	65 (2.5)	65 (2.7)	0.16(-1.17,1.49)		
Developmental Outcomes					
OMCI ¹	37.91 (4.25)	34.33(5.94)	-3.57 (- 6.03,-1.12)		
IYCD ²	17.61 (1.25)	17.58 (1.83)	-0.02(-0.76,0.72)		
FCI ³	15.49(3.75)	15.64 (4.65)	0.15(-1.85,2.15)		
¹ Observation of Moth	er-Child Interaction (OM	CI), range 0-45, higher scores	indicate more positive interactions		
² Infant and Young Ch	nild Development (IYCD)	, range 0-20, higher scores inc	dicate more acquired skills		
³ Family Care Indicato	rs(FCI), range 0-25), grea	ater score indicates better home	e environment for development		
*Reported results are	among infants alive at 6 n	nonths only			

Phases of the Trial		Key Takeaways	
Baseline Interview n= 80		• In this pilot, we observed few differences in infant outcomes with mothers randomized to EFB versus	Contact
Randomization		usual care.	
		• There were less fetal losses (i.e. stillbirths) in EFB compared to usual care.	
Enhanced Friendship Bench n=40	e n=40 Excluded: n=6 • Multiple gestation: n=1 • Stillbirths: n=3	• At delivery, infants in EFB had slightly lower birthweight and gestational age compared to usual care.	



• At 6 months, there was no meaningful difference in weight nor height between arms. Child



- In the EFB arm, there were less total diarrhea episodes and similar severe diarrhea episodes compared to usual care. Vaccination adherence was marginally lower in EFB arm compared to UC.
- A fully powered randomized control trial is necessary to better understand the impacts of EFB on infant health outcomes.



Kriti.Devkota@Quinnipiac.edu