

Why validation is not enough: setting the scene for the implementation of the Kimberley Mum's Mood Scale

Why was this study done?

The Kimberley Mum's Mood Scale was validated in 2016. The validation study demonstrated that the tool was effective in a clinical setting. The study also identified that Aboriginal women and their health professionals found the KMMS acceptable. In this study, we wanted to find out if the KMMS was still being used in the Kimberley after the validation study, and what helped and hindered health care professionals' use of the KMMS.

During the interviews with health care professionals we learnt that many believed the KMMS was only appropriate for women with low literacy. We wanted to understand if Aboriginal women held the same views and to explore aspects of use with Aboriginal women prior to the Kimberley KMMS implementation study.

How was this study done?

Eighteen health professionals involved in perinatal care participated in an online survey or a qualitative semi-structured interview.

We also interviewed ten Aboriginal women (who held administrative, professional or executive roles) to explore aspects of KMMS user acceptability.

We used a framework called the dynamic sustainability framework to help us contextualise the results of the interviews and establish a framework for KMMS implementation.

What did we find out?

Many of the health professionals were not using the second part of the KMMS (the psychosocial discussion tool). Time constraints and a perception that the KMMS is only appropriate for women with literacy issues were identified by health professionals as significant barriers to KMMS uptake. In contrast the Aboriginal women interviewed considered the KMMS to be important for literate Aboriginal women and placed high value on having the time and space to 'yarn' with health professionals about issues that are important to them. Aboriginal women identified the KMMS as holistic, which aligned with their views and expectations of culturally safe care.

Throughout the study we identified a range of practical improvements that would assist with the KMMS implementation including: a KMMS graphic make over, a rewrite of the user manual and training program, and improvements relating to the KMMS on electronic medical record systems.

What does this mean?

The findings have articulated that culturally secure perinatal mental health screening takes longer than traditional mainstream approaches. While this is not an easy tension to overcome, this study identifies that screening is an important component of perinatal care and if administered in a culturally secure way, can optimise primary health and mental health outcomes for perinatal Aboriginal women.

The findings of this study have and will continue to guide the implementation of the KMMS across Kimberley health services.

Publication:

Emma Carlin, Erica Spry, David Atkinson, Julia V Marley. Why validation is not enough: setting the scene for the implementation of the Kimberley Mum's Mood Scale. *PLoS ONE*:

<https://journals.plos.org/plosone/article/authors?id=10.1371/journal.pone.0234346>

Thank you to the women who shared their stories for this study and to the health professionals who shared their experiences.

To receive a full copy of the paper or if you have any questions or comments please direct them to Emma Carlin by email emma.carlin@rcswa.edu.au or phone (08) 9194 3234.