

Multi-centre randomised controlled trial for postnatal depression in British South Asian women - ROSHNI-2

Submission date	Recruitment status	<input checked="" type="checkbox"/> Prospectively registered
23/01/2017	No longer recruiting	<input checked="" type="checkbox"/> Protocol
Registration date	Overall study status	<input type="checkbox"/> Statistical analysis plan
26/01/2017	Completed	<input checked="" type="checkbox"/> Results
Last Edited	Condition category	<input type="checkbox"/> Individual participant data
06/01/2026	Mental and Behavioural Disorders	

Plain English summary of protocol

Background and study aims

Postnatal depression (PND) is a type of depression that some mothers experience after having a baby. It can cause disability and suffering in women, negative consequences for their infants and their family with huge costs to society. Rates of PND in British South Asian (BSA) women are higher than the general population. Due to language and cultural barriers, BSA women often do not access appropriate health care services. This has been highlighted as a major contributor to unequal healthcare across the UK populations. Mothers of South-Asian backgrounds (Bangladesh, Pakistan and India) account for a large number of births in the UK. There is a growing concern about ethnic inequalities in the provision and access to postnatal depression services, which is an identified priority in both England and Scotland. The Positive Health Programme (PHP) is a new culturally adapted treatment program that has been developed to help women with PND. Smaller studies have shown that it may lead to improved mood, and successfully engages and supports women from a South Asian background. The aim of this study is to look at the effectiveness and cost-effectiveness of PHP in the treatment of BSA women with PND.

Who can participate?

British women of South Asian origin with PND who have had a baby within the last year.

What does the study involve?

Participants are randomly allocated to one of two groups. Those in the first group receive the PHP programme as well as standard treatment. This involves 12 group sessions which last for 60-90 minutes every week for two months and then fortnightly for a further two months. The sessions involve learning life skills and having the opportunity to meet other women in similar circumstances. Those in the second group receive usual care only. At the start of the study and then after four and 12 months, participants in both groups complete a questionnaire to measure their depression levels. At the end of the study, the costs of delivering the programme are also calculated from questionnaires completed by participants at the start of the study and after four and 12 months.

What are the possible benefits and risks of participating?

Participants who receive the programme may benefit from improvements to their mood. There are no major risks involved with participants, although some women may find talking about experiences and feelings to be difficult.

Where is the study run from?

Lancashire and South Cumbria NHS Foundation Trust (UK)

When is the study starting and how long is it expected to run for?

July 2016 to August 2022

Who is funding the study?

National Institute for Health Research (UK) - HTA programme

Who is the main contact?

1. Dr Farah Lunat - project manager

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2. Professor Nusrat Husain (scientific)

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Additional identifiers

Protocol serial number

CPMS 32313

Study information

Scientific Title

Multi Centre RCT of a group psychOlogical intervention for poStnatal depression in britiSH mothers of south asiaN origIn - ROSHNI-2

Acronym

ROSHNI-2

Study objectives

The aim of this study is to investigate the clinical and cost-effectiveness of a culturally adapted group psychological intervention called the Positive Health Programme (PHP) in British South Asian (BSA) women with post-natal depression.

Added 16/09/2022:

An add-on study was included in August 2021. The aim of this additional work is to explore and understand the wider consequences of the global pandemic on BSA women during the perinatal period in the context of mental health, isolation, education, interpersonal relationships, child development and views on the vaccination and wider impacts. The pandemic has resulted in the closure of parent support groups including baby play, breastfeeding support and child health clinic drop-in sessions. The researchers will also explore the nature and intensity of breastfeeding problems encountered, help-seeking behaviours and sources of support.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 06/01/2017, North West - Greater Manchester South Research Ethics Committee (3rd Floor, Barlow House 4 Minshull Street, Manchester, M1 3DZ, United Kingdom; +44 (0)207 104 8235; nrescommittee.northwest-gmsouth@nhs.net), ref: 16/NW/0727

Study design

Randomized; Interventional; Design type: Treatment, Screening, Diagnosis, Psychological & Behavioural

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Postnatal depression, maternal mental health, interpersonal violence

Interventions

Consenting, eligible women will be randomized via an independent remote randomisation service based at the King's College Clinical trials unit (CTU). After each block of 18 women have been recruited into the trial in each centre, women will be block randomised to the two treatments to give 9 intervention and 9 control participants.

Intervention: Participants receive a CBT-based culturally adapted group psychological intervention called the Positive Health Programme (PHP) added to the Treatment As Usual. The manual assisted intervention PHP has been designed to be delivered by non-specialist mental health professionals. The 12 groups/sessions are educational life skills classes, based on a CBT model. Each PHP session will last for 60-90 minutes and will be delivered weekly for two months, and then fortnightly for further two months.

Treatment as usual (TAU): Participants undergo study assessments along with routine assessment and management as usually conducted by the participating general practices.

The assessments for both the arms will be at baseline, at 4 months (end of intervention) and then 12 months after baseline. The duration of the assessment will not be more than 45-60 minutes.

Added 16/09/2022:

An additional work stream was included in November 2021 as an add-on study to the ROSHNI-2 project (14/68/08, HTA). The proposed work is shaped by the suggestions made by participants in the current ROSHNI-2 study for a follow-up and re-engagement to explore other associated risk factors related to maternal mental health and specifically in the context of the pandemic. We aim to increase our understanding of the pandemic-related impact on BSA women including Interpersonal Violence (IPV) in BSA communities. The add-on study is supported by an ongoing MRC-funded international survey study - Psychological impact of COVID-19 pandemic and experience: An International Survey (IRAS Project ID 282858). The project is led by Southern Health NHS Foundation Trust and The University of Portsmouth. It aims to investigate and explore the psychological impact of COVID-19, the resultant restrictions and the impact on behaviours and changes in mental wellbeing across the global population.

Intervention Type

Other

Primary outcome(s)

Recovery from postnatal depression is measured using the Hamilton Depression Rating Scale (HDRS) at 4 months (end of intervention)

Key secondary outcome(s)

1. Treatment response is measured using the Hamilton Depression Rating Scale (HDRS) at baseline, 4 and 12 months
2. Cost data will be collected using an Economic Patient Questionnaire at baseline, 4 and 12 months

Completion date

26/08/2022

Eligibility

Key inclusion criteria

1. Self-ascribed British women of South Asian origin as defined by Office of National Statistics (ONS, 2011)
2. Over the age of 16 years and living with their infants up to the age of 12 months (1-Year)
3. Meet the criteria for DSM-V depression

Participant type(s)

Patient, Service user

Healthy volunteers allowed

No

Age group

Mixed

Lower age limit

16 years

Upper age limit

110 years

Sex

Female

Total final enrolment

732

Key exclusion criteria

1. Women with diagnosed learning disability that will impact on capacity to consent
2. Postpartum psychosis
3. Any other diagnosed psychosis
4. Actively suicidal (previous history of self-harm or suicide attempt).

Date of first enrolment

08/02/2017

Date of final enrolment

26/08/2022

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

Lancashire and South Cumbria NHS Foundation Trust
The Lantern Centre
Vicarage Lane
Preston
England
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Sponsor information

Organisation

Lancashire Care NHS Foundation Trust

ROR

<https://ror.org/03zefc030>

Funder(s)

Funder type

Government

Funder Name

National Institute for Health Research

Alternative Name(s)

National Institute for Health Research, NIHR Research, NIHRresearch, NIHR - National Institute for Health Research, NIHR (The National Institute for Health and Care Research), NIHR

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated and/or analysed during the current study will be included in the subsequent results publication.

IPD sharing plan summary

Other

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		12/10 /2024	15/10 /2024	Yes	No
Protocol article		01/01 /2022	16/09 /2022	Yes	No
HRA research summary			28/06 /2023	No	No
Other publications	Economic evaluation	17/03 /2025	21/03 /2025	Yes	No
Other publications	Qualitative study exploring perceptions of acceptability and implementation	07/12 /2025	06/01 /2026	Yes	No
Participant information sheet	version V1	01/07 /2016	26/01 /2017	No	Yes
Poster results			10/07 /2024	No	No