



Perinatal mental health

Evidence has shown that between 10 and 20% of women develop a mental illness either during pregnancy or within the first year after having a baby.

Women who experience disadvantages such as social exclusion or poverty are at a higher risk of developing perinatal depression. The risk of depression is twice as high for teenage mothers.

The role of counselling and other psychological therapies

Evidence demonstrates that psychological therapies are a key intervention in helping to reduce the adverse effects of maternal

million a year to bring the whole pathway of perinatal mental health care up to the level and standards recommended in national guidance and alleviate many of the challenges. This therefore demonstrates that the cost to the public sector of perinatal mental health problems is five times greater than the cost of providing the services that are needed to address them.

Key facts

- Research by the National Childbirth Trust (NCT) found that nearly half of new mothers' mental health problems are not picked up by a health professional².
- Whilst traditionally much focus has been placed on Postnatal Depression, recent advances in neuroscience³ have demonstrated that mental health problems occur during the antenatal period and that problems go beyond depression, to include anxiety, psychosis, post-traumatic stress disorder and other conditions.
- The mental health of mothers has a significant impact on the emotional wellbeing and development of their child(ren) within the critical 1000 days period. Some 28 per cent of mothers with mental health problems report having difficulties bonding with their child⁴. The report, Postnatal Depression and Emotion: The

misfortune of mother-infant interactions, notes that 'mothers suffering from depression find it difficult to respond to their babies' needs and to communicate with them'⁵. Research suggests that this initial dysfunctioning of mother-baby relationships affects children's development by impairing babies' psychomotor and socio-emotional development⁶.

- As well as the direct impact on the child, it can have longer term adverse effects on the parents and wider family. The onset of a maternal mental health condition can precipitate relapse or recurrence of previous mental illness, has the potential to herald the onset of long-term mental health problems, and is associated with an increased risk of maternal suicide⁷.
- Postnatal depression has also been linked with depression in fathers and with high rates of family breakdown⁸. In addition, depression in mothers appears to increase the risk of poor birth and child outcomes. These include higher rates of spontaneous abortion, low birth weight babies, developmental delay, retarded physical growth, and physical illnesses such as chronic diarrhoeal illness.
- There is a body of evidence to show that children born to depressed mothers do less well educationally, experience higher levels of behavioural problems⁹ and are more likely to develop psychological problems in later life¹⁰. This leads to a higher risk of poor

² Hemming, L (2018) What is the evidence of direct impact from a GP maternal six-week postnatal check on mental health outcomes?

³ Rosier, J (April 2015) BPS Journal Vol 28, What has neuroscience ever done for us?

⁴ Boots Family Trust (2013) Perinatal Mental Health: Experiences of women and health professionals

⁵ Gil, S. Drot-Volet, Lavel, V. AND Teissedre, F. (2012) Depression and Emotion: The misfortune of mother-infant interactions

⁶ Glavin, K. Smith, L, Sorum, R. and Ellefsen, B. (2010) Redesigned Community Postpartum Care to Prevent and

Treat Postpartum Depression in Women – a one-year follow up study

⁷ Oates, M. British Journal of Psychiatry (2003) Suicide: The leading cause of maternal death

⁸ Ballard, CG. Davis, R. Cullen, PC. Mohan, RN. Dean, C.

emotional, intellectual, social and physical development leading to anxiety, depression, ADHD, slower learning, doing worse at school and a higher risk of criminal behaviour.

Recommendations

- Research by the National Childbirth Trust (NCT) found that nearly half of new mothers' mental health problems are not picked up by a health professional. BACP supports their call to add into the GMS contract a requirement for GP practices to give every new mother a separate appointment for the maternal six-week check, including a supportive discussion about her emotional and mental wellbeing . It is estimated this would require the modest investment of some £30m per annum.
- BACP calls for improved access to counselling for all expectant mothers as a matter of course , with those mothers currently experiencing mental ill health to be given priority access.
- Alongside the NCT's recommendation for improved training in relation to maternal mental health, BACP would like to see GP's have an increased awareness of counselling and psychotherapy and how to access these services.