

Equal access for all who need specialised maternal mental health services

Resolution Shortlist Briefing Notes



Equal access for all who need specialised maternal mental health services

'There is presently an acute shortage of quality specialised maternal mental health services, meaning that many vulnerable women, their babies, and families face a postcode lottery of perinatal mental health support. The NFWI calls on NHS commissioners to prioritise the development of specialised perinatal mental health support services so that pregnant and postnatal women, their babies, and families are able to access the support they need.'

Proposer's Position

The proposer is concerned that new or expecting mothers (referred to in this briefing as 'perinatal women') suffering from mental health problems are unable to access the type of specialist support services that they require in order to make a full recovery.

This is because less than 15% of localities provide specialist mental health services specifically for perinatal women, meaning that only a small minority of women are able to access the help they and their families need. The proposer would like to see NHS commissioners act to close this gap in service provision and prioritise the delivery of maternal mental health services.

Prioritising these services can take many forms and, therefore, the proposer is not prescriptive about how NHS commissioners should go about it. Commissioners could devise a regional perinatal mental health strategy, commit to training specialist perinatal mental health midwives or other care professionals, allocate funding for a mother and baby unit, or increase their postnatal care funding more generally.

The proposer's main aim is for regional commissioners to devise and action solutions which are locally appropriate in order to ensure that women get the support they need to recover and babies are not adversely impacted in the long-term.



Up to 20%

of women develop a mental health problem during pregnancy or within a year of giving birth

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What is perinatal mental illness and how common is it?

Mental illness in pregnant and postnatal women is very common; between 10 and 20% of all perinatal women will experience an identifiable mental health issue that requires treatment. In the UK this means that annually between 70,000 and 140,000 women, their babies, and families cope with a perinatal mental health issue. This does not include the even larger number of women who experience the short-term 'baby blues.'

The most common mental health problems in perinatal women are: anxiety and/or depression, obsessive compulsive disorder, post-partum psychosis, post-traumatic stress disorder, adjustment disorders, and eating disorders.

These conditions often develop suddenly and can range from mild to severe.

What is their impact?

With the right help, women can make a full recovery from these illnesses. If women are not treated, however, there can be devastating consequences. Suicide is the leading cause of death for women during pregnancy and the first year following birth, as many women are unable to get the help they need. Furthermore, when mothers suffer from these illnesses and do not get the support they require, their children are at a greater risk of experiencing developmental, cognitive, or behavioural problems.

In addition to the tremendous personal cost to women and their families, there is also an economic cost to society and public services. Perinatal depression, anxiety, and psychosis cost about £8.1 billion for each one-year cohort of births; of these costs 28% relate to the mother and 72% relate to the baby. Specifically, the cost to the NHS annually is £1.2 billion. This is about five times what it would annually cost to improve services to prevent and treat

How could the WI work on this resolution if it was passed?

If this resolution was passed, the NFWI would develop a full campaign plan, taking into account the most recent developments. But to help you inform your discussions, here are some ways the WI would consider working on this issue:

At a national level: The NFWI would pressure CCGs and health boards to develop regional perinatal mental health strategies and allocate resources to specialist services.

At a regional level: Federations could hold the CCGs and health boards in their area to account, pressuring the ones that fail to act and disseminating best practice from the ones that do.

At a local level: WIs could work to destigmatise this mental health issue by partnering with local charities and raising awareness.

What is being done?

Perinatal women across the UK are not getting universal, high quality care and support for their needs. Despite the fact that there is a consensus about what kind of treatment works and the services that are required, there remain unacceptable variations in the support structures available.

Only 3% of Clinical Commissioning Groups (CCGs) in England currently have a perinatal mental health strategy in place; more than 40% of England's CCGs have no specialist services at all and 70% of health boards in Wales have no specialist services. There are only 17 mother and baby units (which provide specialist community perinatal mental health services) in England and none in Wales or the Islands.

Recently, there have been some encouraging developments. In February 2016 the Mental Health Five Year Forward View recommended that NHS England ensure that by 2020/2021 at least 30,000 more women every year had access to perinatal mental health support and the Welsh Government announced in 2015 that £1.5 million would be spent annually over 5 years for specialist perinatal mental health support services.

On 26 November, 2016 NHS England announced £60 million of funding to deliver those above aims and commissioned four new mother and baby units.



Arguments for the resolution

- The NHS in England and Wales has recently made commitments to improve access to support services, but campaigners argue that they don't go far enough. Now is the time for the NFWI to throw our weight behind this issue and drive forward implementation.
- This resolution complements our existing *More Midwives* campaign nicely and would allow us to leverage our existing influence and reputation as an authoritative voice on maternity services more effectively.



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Arguments against the resolution



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- The NFWI has just undergone a big programme of work regarding maternity services; is another mandate on a related topic necessary?
- The Mental Health Five Year Forward View has recently endorsed the principle of this resolution and has allocated funds accordingly. Although campaigners say the funding is not enough, in this current financial climate it may be the most robust deal possible.

Further information

Everyone's Business

<http://everyonesbusiness.org.uk/>

T: 07807 130878

E: maria@app-network.org

Maternal Mental Health Alliance

<http://maternalmentalhealthalliance.org/>

(This website will link to a host of other organisations that may be able to provide speakers or answer any questions)

Video Resource

If you would like to learn more about post-partum illnesses and see how a mother and baby unit functions watch the documentary *My Baby, Psychosis, and Me*:

<https://youtu.be/9obFOonNENk>

Public Affairs Department contacts

If you have any questions about the resolutions or the resolutions process then please get in touch with the NFWI public affairs department:

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