

Volunteers critical in support of women suffering from antenatal, perinatal depression

September 17 2012

(Medical Xpress)—An independent evaluation by Warwick Medical School warns that the health service lacks sufficient capacity to respond to perinatal depression, while highlighting a potential role for the voluntary sector, particularly in the antenatal period.

The report published by Family Action also demonstrates that the charity's Perinatal Support Projects are delivering good outcomes for vulnerable mothers and babies accessing the service, as well as the volunteers who befriend and support them.

The prevalence of perinatal [mental health problems](#) is high with estimates suggesting that around a fifth of women experience ante-natal [anxiety and depression](#) with even more women experiencing postnatal anxiety or depression.

Perinatal depression can cause adverse outcomes for mothers and babies including preterm and [low birth weight](#), as well as having a negative effect on the parent-infant relationship and in turn, children's development, and behaviour.

Family Action's Perinatal Support Projects (PSPs) aim to improve parental mental health and attachment between mothers and infants, reduce [social isolation](#) and improve self-confidence of both service users and volunteers. Volunteer befrienders are supervised and trained by a

professional project coordinator.

The volunteers support women with mild to [moderate depression](#) who would not usually be eligible for community [mental health services](#), and to whom midwives and health visitors cannot offer intensive support.

The independent evaluation by Professor Jane Barlow and Mrs Christine Coe of Warwick Medical School shows that:

- The PSP is serving a group of very disadvantaged women with a high level of unmet need with over two thirds living in workless households, one-third being lone parents, and between two and eleven percent having children on the child protection register or with a child protection plan. This is in addition to the mothers having mild to moderate perinatal anxiety and/or depression
- There is an improvement in outcomes across the board for those families for whom pre and post intervention data were available (26 – 33% of families). The results of the quantitative data point to significant reductions in maternal anxiety and depression, and improvements in self-esteem, and warm feelings toward the baby
- Following involvement with the PSP, service users were able to access a variety of services including peer support, socialising with other mothers and babies and parenting support to improve baby wellbeing.
- Volunteer befrienders reported positive outcomes from volunteering, including increased confidence and self esteem.
- Referrers to the service including midwives, health visitors and social workers, all identified high levels of unmet need for women with mild to moderate depression in their local populations and rated very highly the opportunity to refer women to the PSP. They were unanimous in agreeing the PSP filled a gap left by other services

- There is further scope for the PSP to work with service users in the antenatal period where the impact may be even greater; and
- There is good evidence of effective partnership working between the Family Action, PSPs and statutory sectors including effective information sharing and the conduct of joint assessments

Professor Jane Barlow of Warwick Medical School, who specialises in researching interventions in the perinatal period and led the Family Action evaluation, said:

"These findings are very promising for Family Action's perinatal support projects and more generally for the potential of the voluntary sector to intervene in this critical period for the baby. It seems the voluntary sector could be particularly effective in engaging hard-to-reach vulnerable women in services and if we can focus more of the intervention in the antenatal period it could be particularly fruitful for the development outcomes for vulnerable babies."

Family Action Chief Executive, Helen Dent said: "Research is increasingly telling us that intervening in the perinatal period is vital to the life chances of very disadvantaged children. Yet this evaluation highlights a clear gap in health services for vulnerable mothers with mild to moderate depression, which can have serious negative consequences on the life chances of children.

"We are calling on Government, local authorities and health agencies to invest in perinatal services so that women and children don't slip through this gap. The results of our Perinatal Evaluation are very encouraging and shows the added value that voluntary sector support for vulnerable mothers can bring to the services mix. It's time for a renewed effort to close the gap in services for these families and their babies."

Provided by University of Warwick

Citation: Volunteers critical in support of women suffering from antenatal, perinatal depression (2012, September 17) retrieved 14 July 2023 from

<https://medicalxpress.com/news/2012-09-volunteers-critical-women-antenatal-perinatal.html>

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