



**MATERNAL MENTAL HEALTH**  
**everyone's business**



GLOBAL ALLIANCE FOR  
MATERNAL MENTAL HEALTH

# Soins mentaux périnataux au Royaume Uni

**Dr Alain Grégoire**, DRCOG, MRCPsych  
President, UK Maternal Mental Health Alliance et  
Global Alliance for Maternal Mental Health  
Co-auteur, NICE APMH Guideline



*Perinatal mental illness*

# Soins dans la NHS



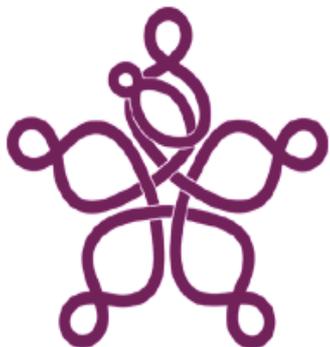


**I can announce today a £365 million investment by 2020, which will mean that at least 30,000 more women each year will have access to evidence-based, specialist mental health care during or after pregnancy.**



MATERNAL MENTAL HEALTH ALLIANCE  
Awareness Education Action





# MATERNAL MENTAL HEALTH ALLIANCE

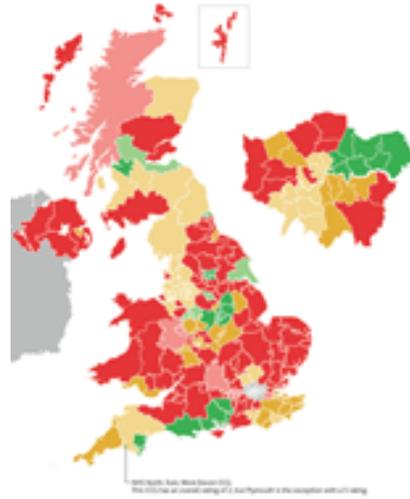
Awareness Education Action  
to improve the lives of mothers and their infants

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# MATERNAL MENTAL HEALTH *everyone's business*



# Objectifs de la MMHA

- Parcours comprenant tous les services
- Services spécialistes en psychiatrie périnatale partout au RU (NICE 192)
- Accès aux thérapies pour mères et pères: CBT, DBT, IPT
- Thérapies relation mère-enfant (NICE)
- Sages-femmes et infirmières spécialistes dans tous les services

- Peer support
- Parent-infant attachment services ('Infant MH')

**Severe,  
high risk**

- Acute psychosis (2/1000), Severe/complex (2/1000); Chronic SMI (2/1000)
- **Services:** Mother and Baby Units (2.5-3 beds/10,000 births)
- Commissioning: national (England)

**Admission  
vulnerable**

- Severe illness (30/1000)
- **Services:** Specialist Perinatal Community Teams (6-16,000 births) + effective supported pathway
- Commissioning: CCGs: Mental Health; + maternity + LAs for health visitors

**Mild/moderate**

- Mild/Moderate illnesses 10%
- **Services:** Treatment Primary Care/IAPT; Specialist MWs & HVs, specialist advice
- Commissioning: CCGs and LAs

**Mild illness and severe distress**

- Mild illness and severe distress - 15% - 30%
- **Services:** Time and skills in universal & Primary Care
- Commissioning: CCGs and LAs

**Maternal-child health and wellbeing**

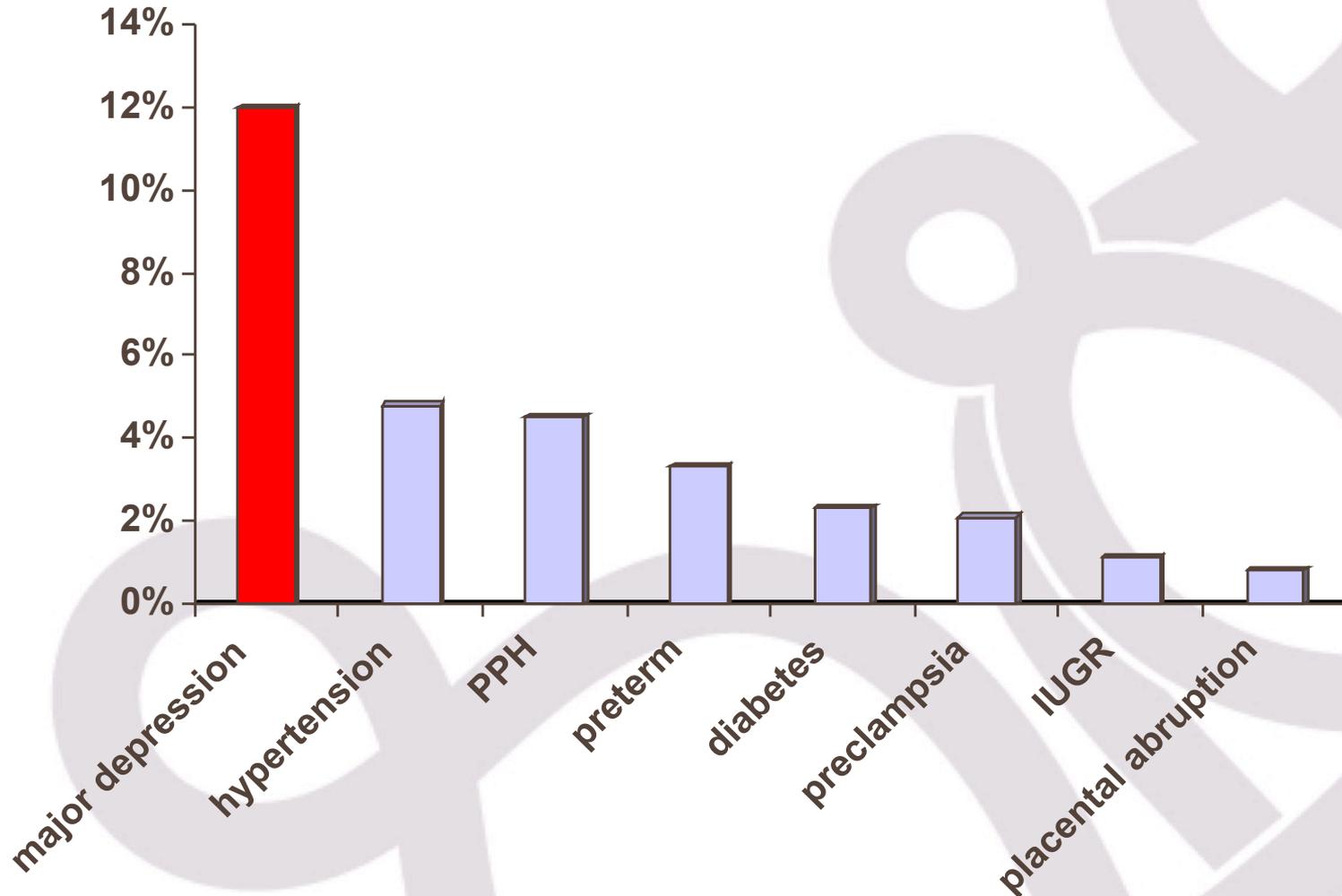
- Good psychological care promoting good MH
- **Services:** Knowledge & compassion, understanding for all

# Conditions nécessaires

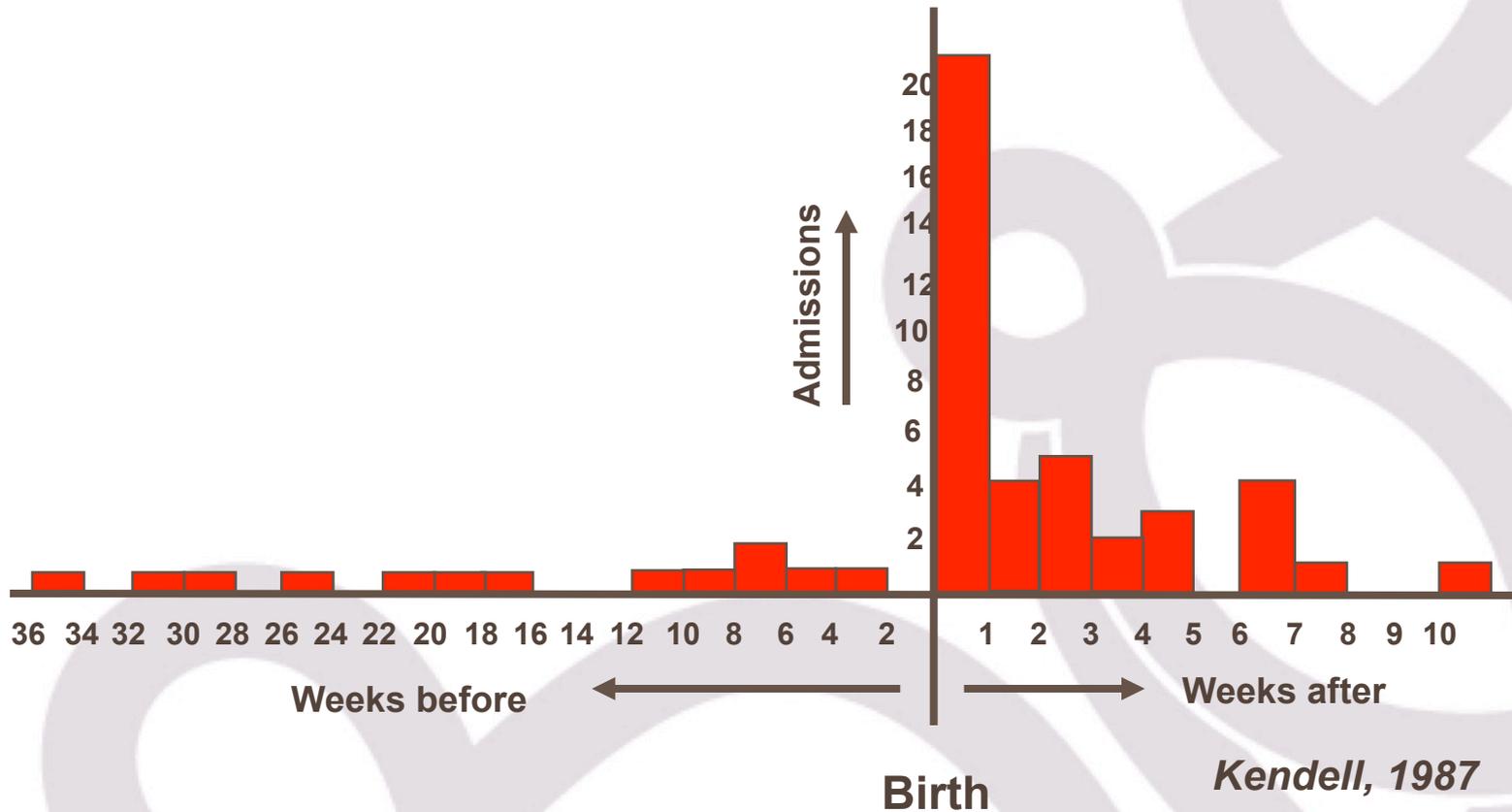
## ☑ Appréhension correcte des besoins

- Guide des bonnes pratiques(NICE) et socle de preuves scientifiques
- Modèles réussis pour la prestation des soins
- Normes/Standards de qualité et système d'assurance
- Confirmation des gains économiques
- Consensus et soutien actif de tous les intervenants

# Dépression: la plus fréquente complication médicale de la maternité

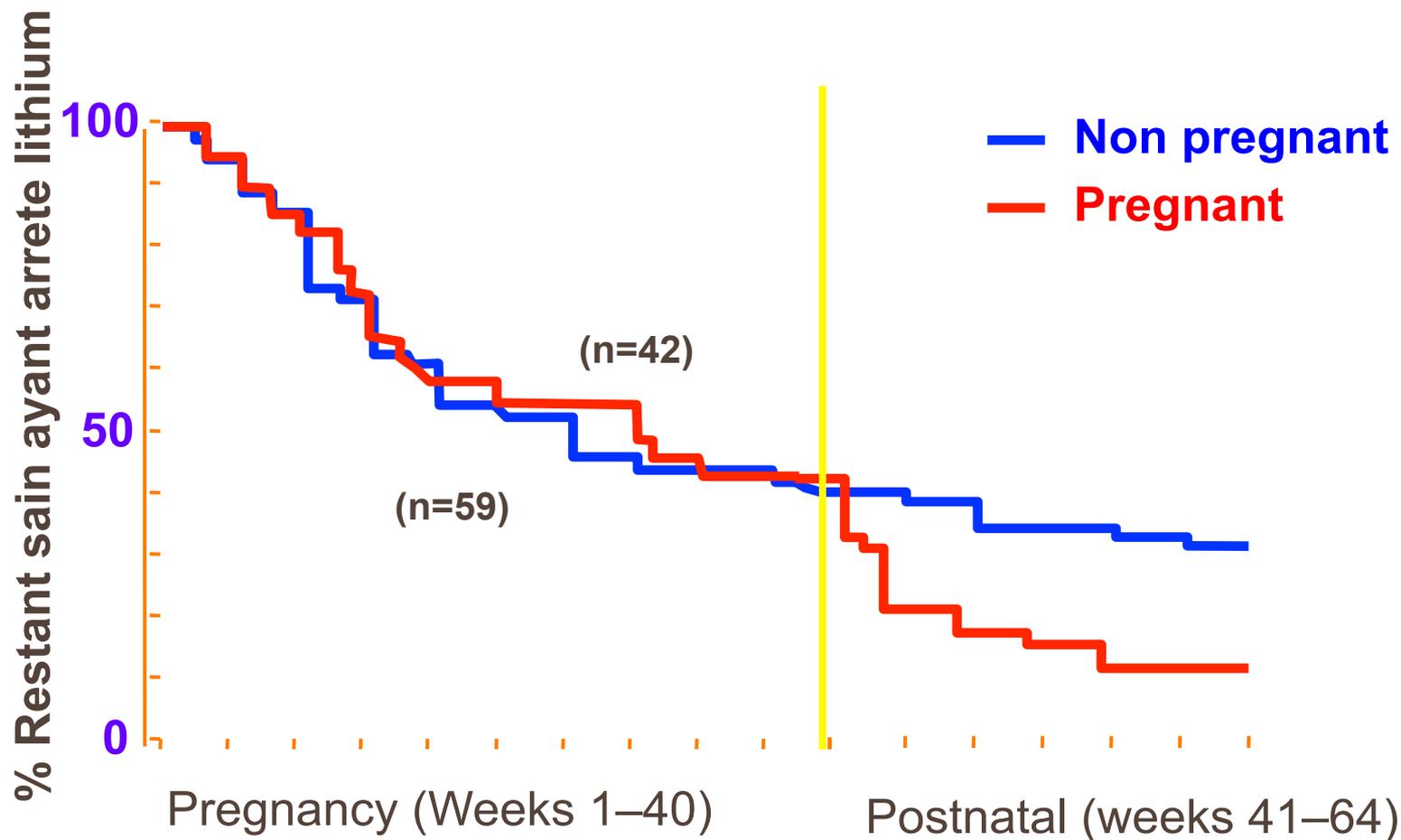


# Le plus grand risque de psychose

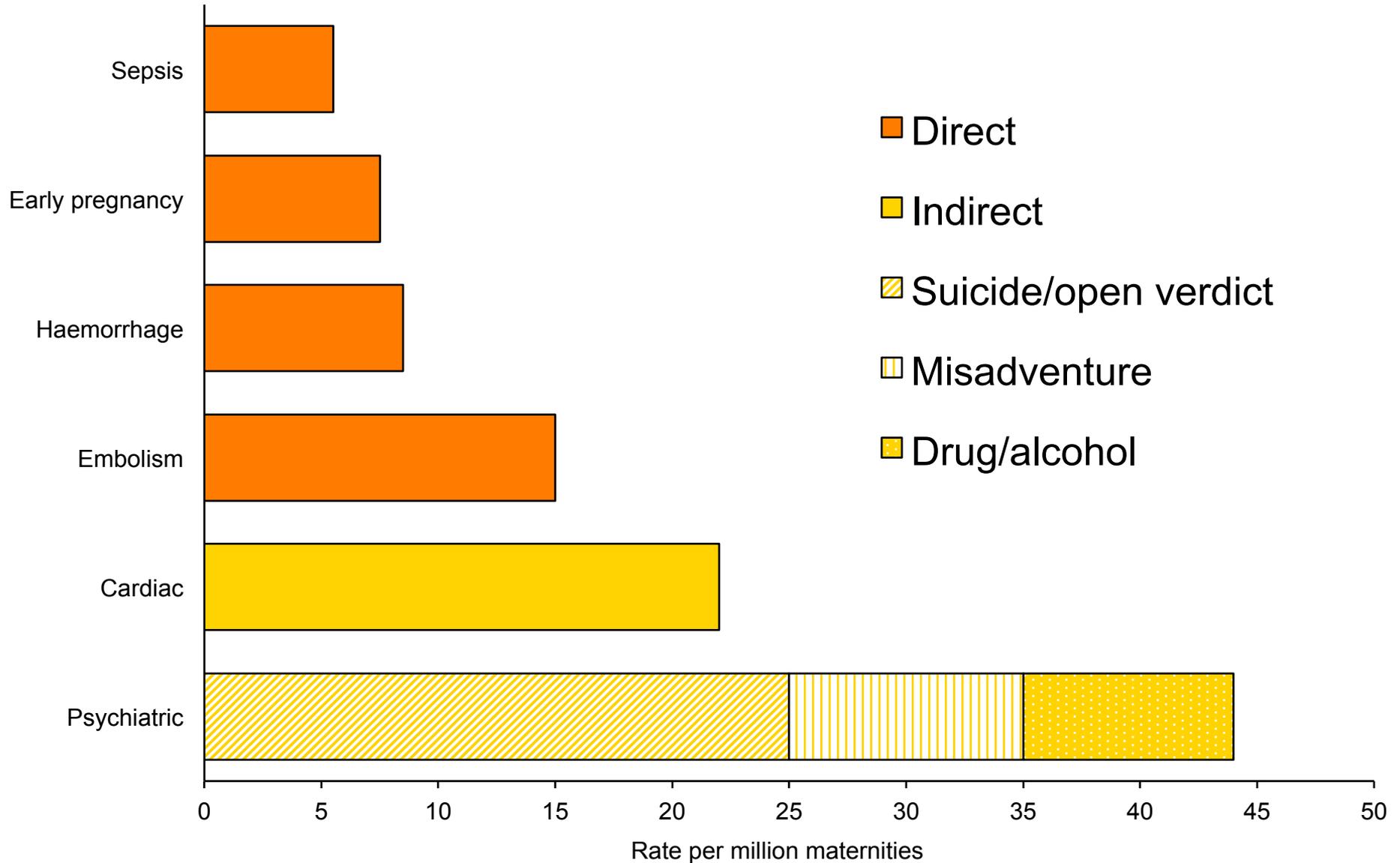


***Psychose puerpérale: plus rapide, plus grave, et plus grand risque qu'à tout autre moment*** (Oates, 1996; Appleby et al 1998)

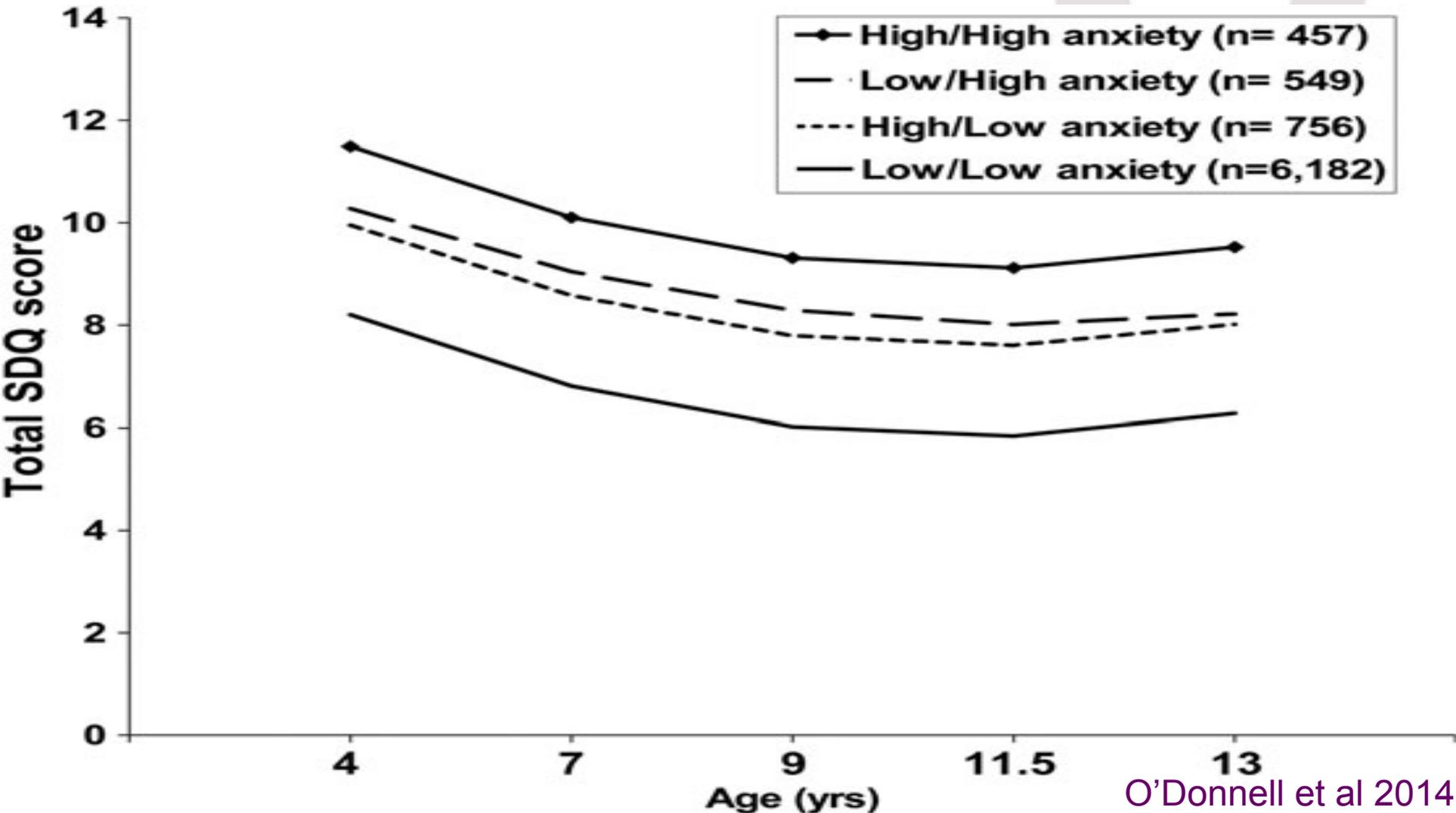
# Le plus grand risque de rechute bipolaire



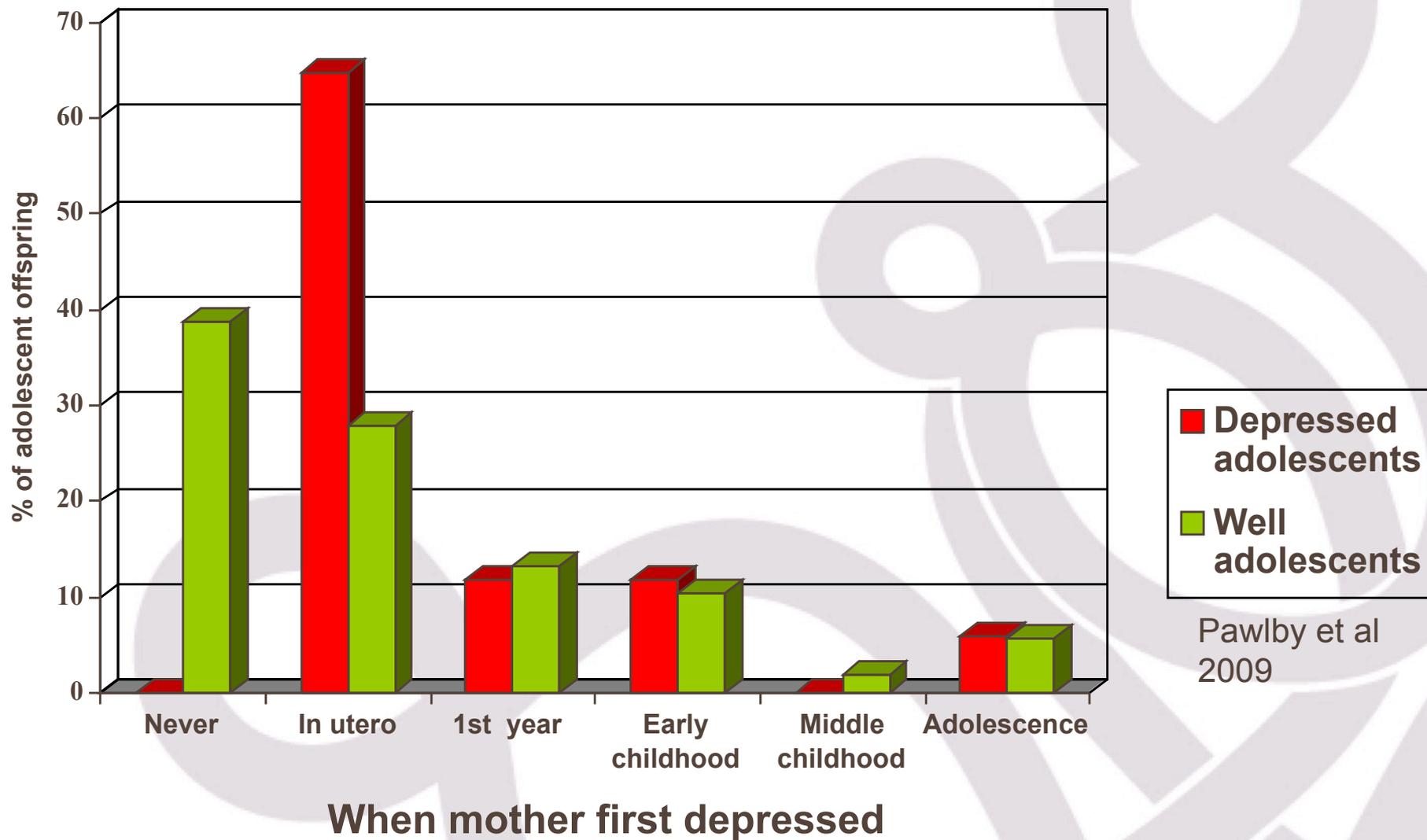
# La principale cause de mortalité de la mère (-9 à +12 mois)



# Anxiété (ou dépression) maternelle à 32 semaines/+3mois et troubles psychologiques des enfants (SDQ) à 4-13 ans

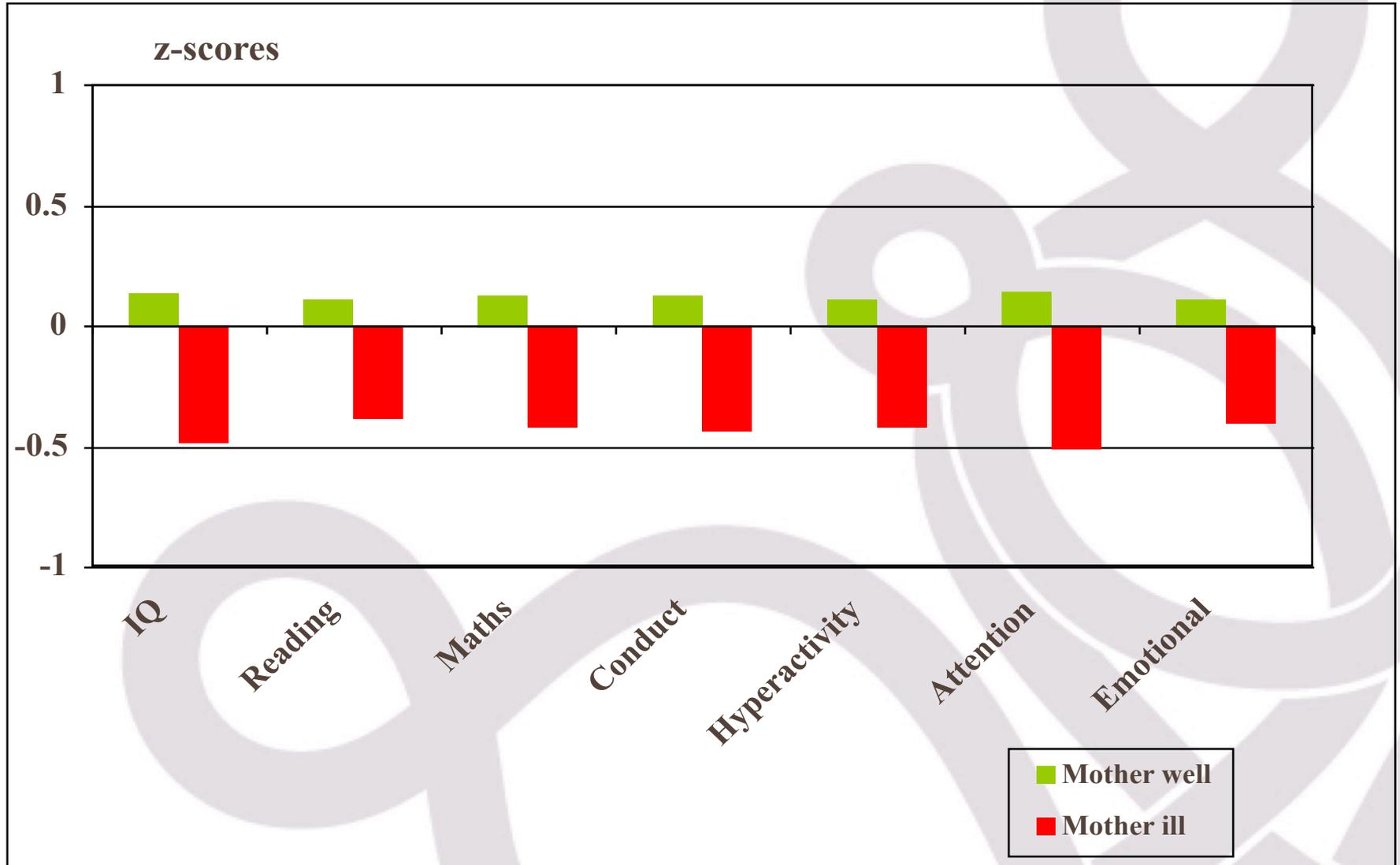


# Dépression à 16 ans → 100% mères avaient une dépression, 60% pendant la grossesse

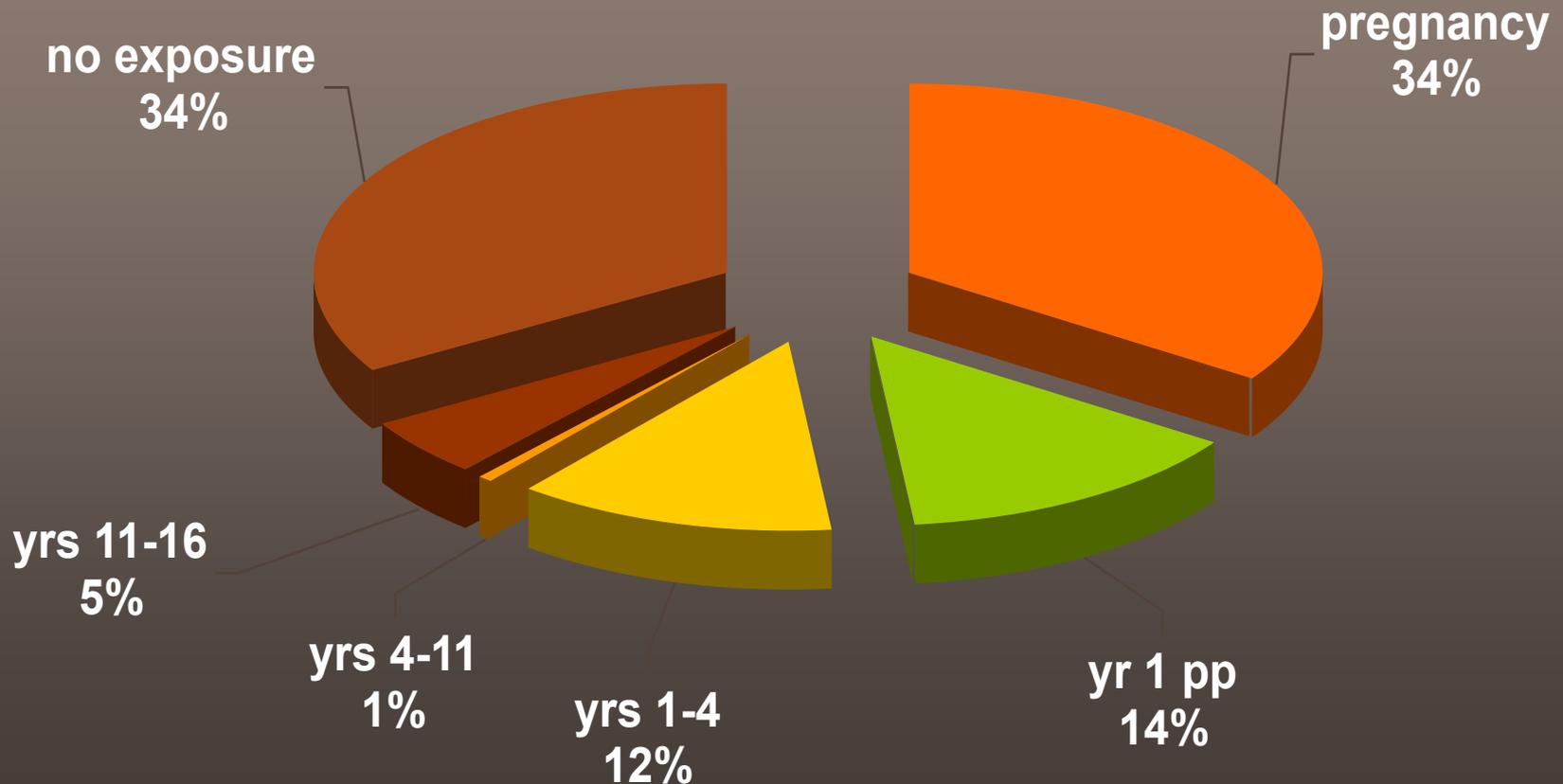


# Depression postnatale

## effets sur enfants à 11 ans *(Hay et al 2008)*



# La période périnatale: la plus importante pour la **detection** de la depression

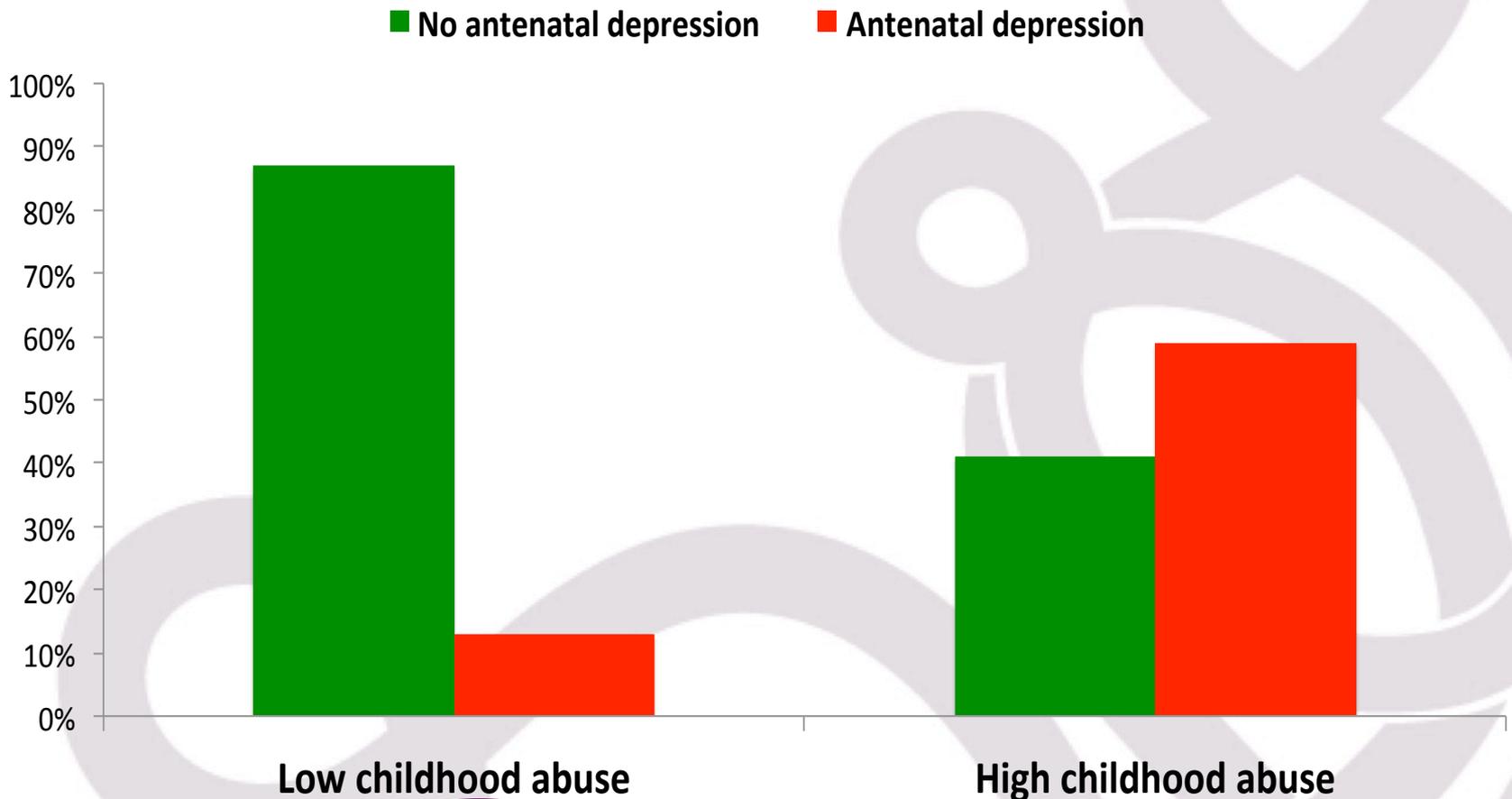


*(Sharpe et al 2006)*

# The crucial role of perinatal mental health care in transgenerational mental health

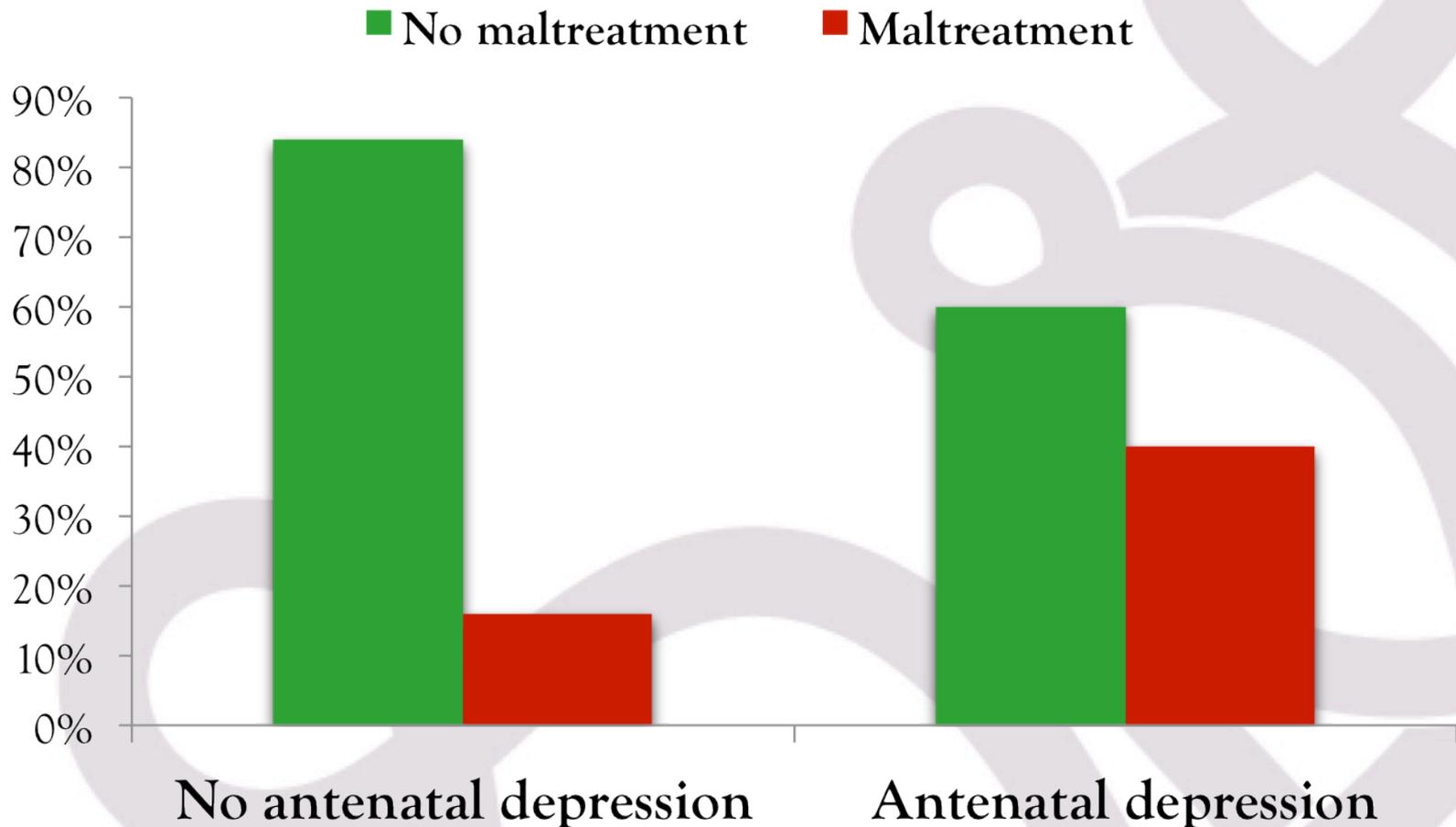
- 50 - 80% of perinatal patients have history of childhood maltreatment (general population = 20%)
- Good perinatal mental health may be a crucial point to break cycle of maltreatment

# Adverse childhood experiences: the most important predictor of antenatal depression (x10)

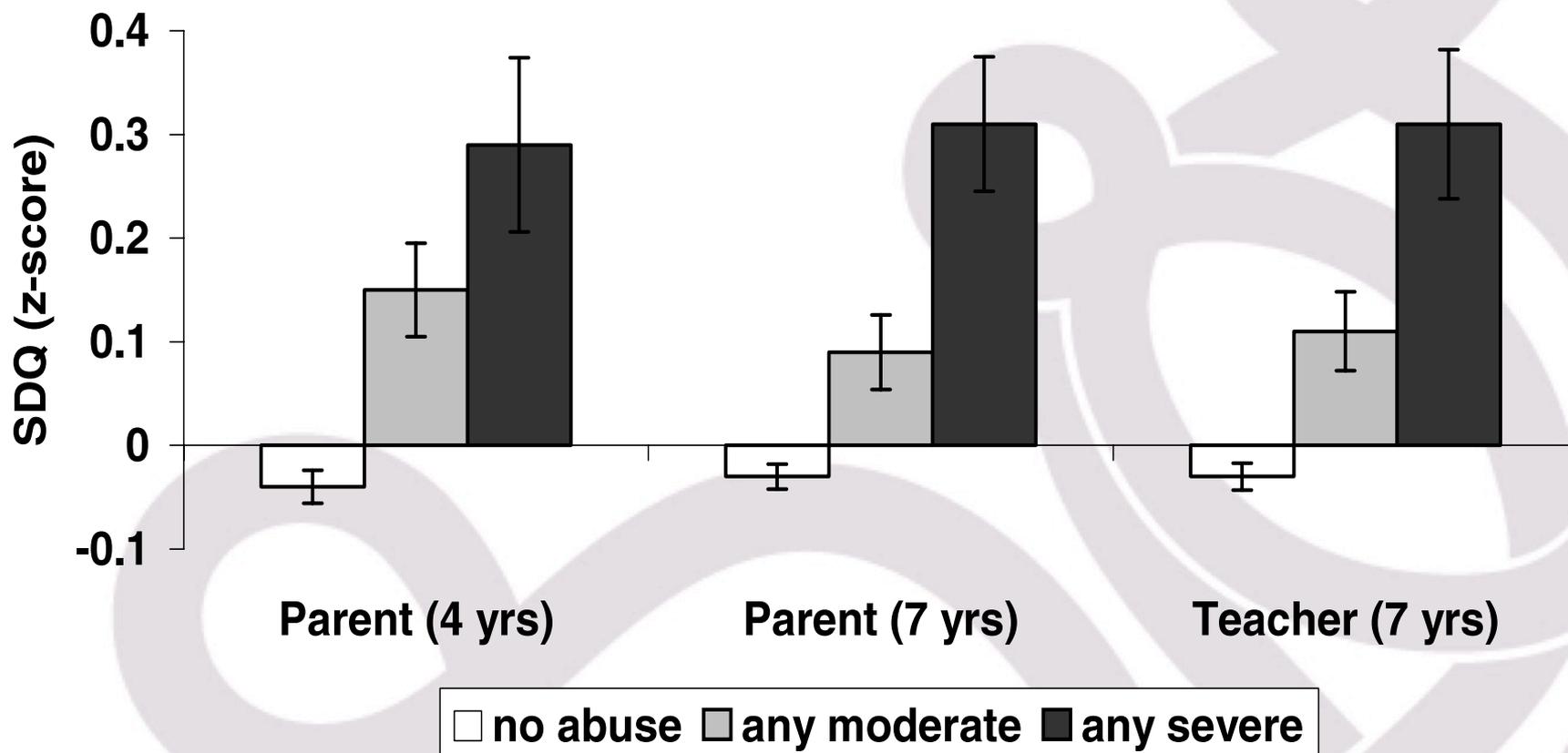


$\chi^2(1) = 23.76, p < .001, \text{OR} = 10.00; \text{CI: } 3.57, 28.01$

# Maternal antenatal depression: 3.6x risk of maltreatment in offspring



# Mothers' childhood maltreatment has a direct impact on child outcomes



SDQ: childhood emotional and behavioural problems

Collishaw et al 2007

# Transgenerational trauma and poor mental health

Generation 0  
Childhood trauma  
+  
Maternal antenatal  
depression

→ **Generation 1**  
Childhood trauma  
+  
Maternal antenatal  
depression

→ **Generation 2**  
Childhood trauma  
+  
Maternal antenatal  
depression

→ **Generation 3**  
Childhood trauma  
+  
Maternal antenatal  
depression

→ **Generational 4**  
Childhood trauma  
+  
Maternal antenatal  
depression



# Adult effects of childhood adverse emotional experiences: C-PTSD

- Hypervigilance, fear, beliefs that negative events could occur unpredictably at any time
- Minor events precipitate rapid and extreme changes in mood, thinking and behaviour
- Self preservation through detachment from current anguish: dissociation, non-psychotic voices, somatisation
- Self blame and self harm
- Extreme lack of trust in others, reject approaches and offers of help

# Economic costs (LSE, 2014)

Cost if we don't act

**£8.1bn**

Cost of taking action

£337m



Of these costs

**28%**

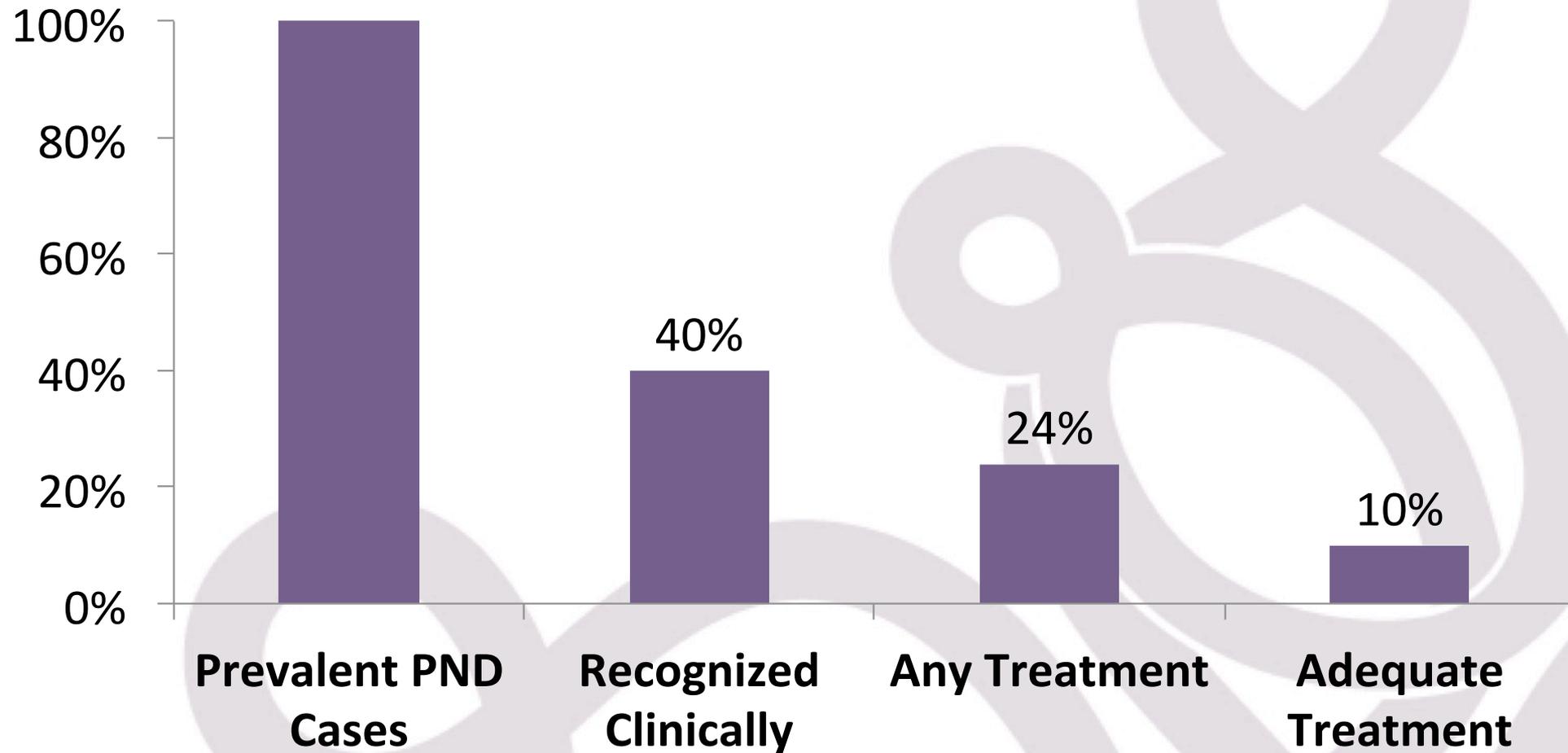
relate to the mother

**72%**

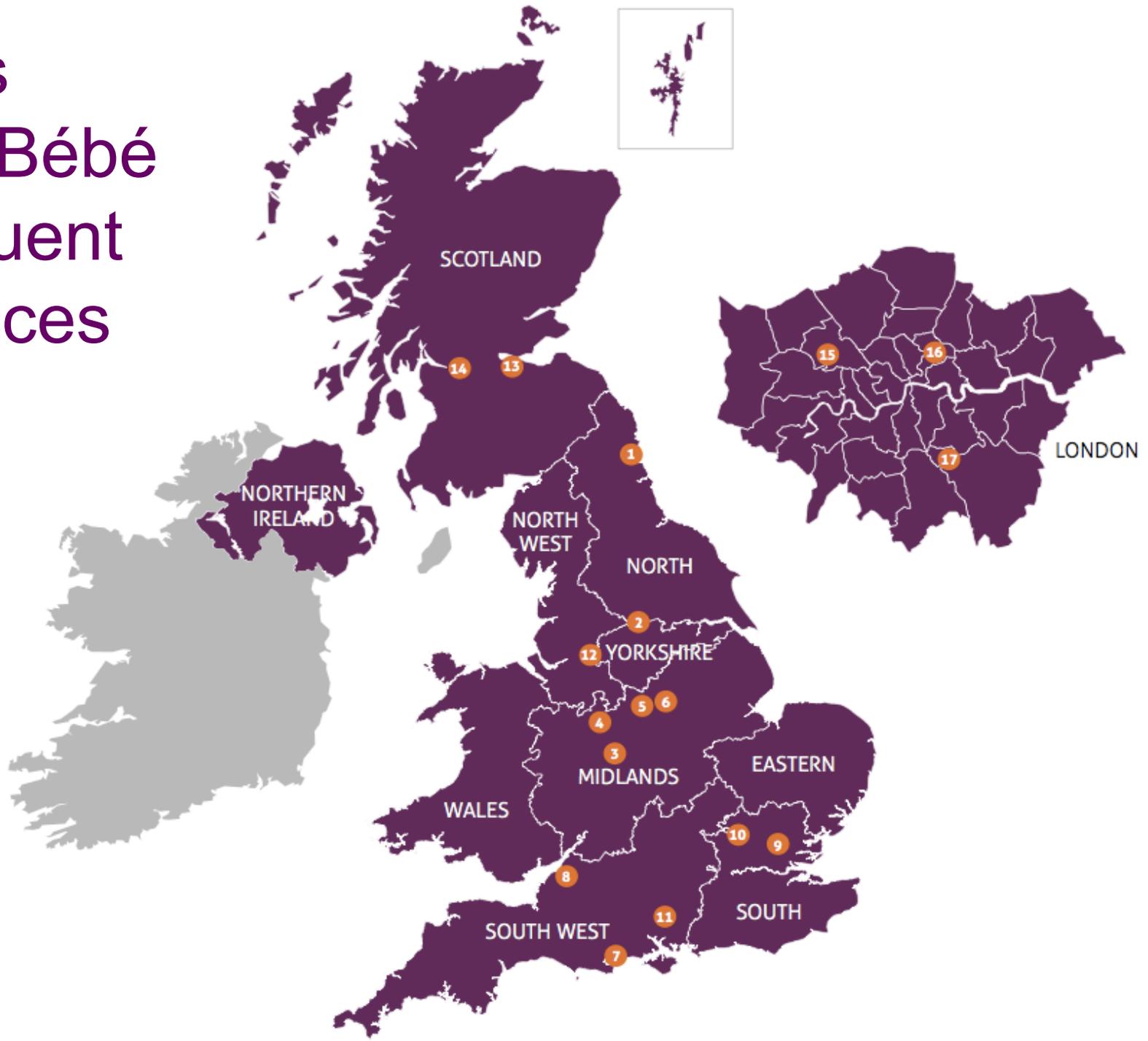
relate to the child

# Depression postnatale : soins

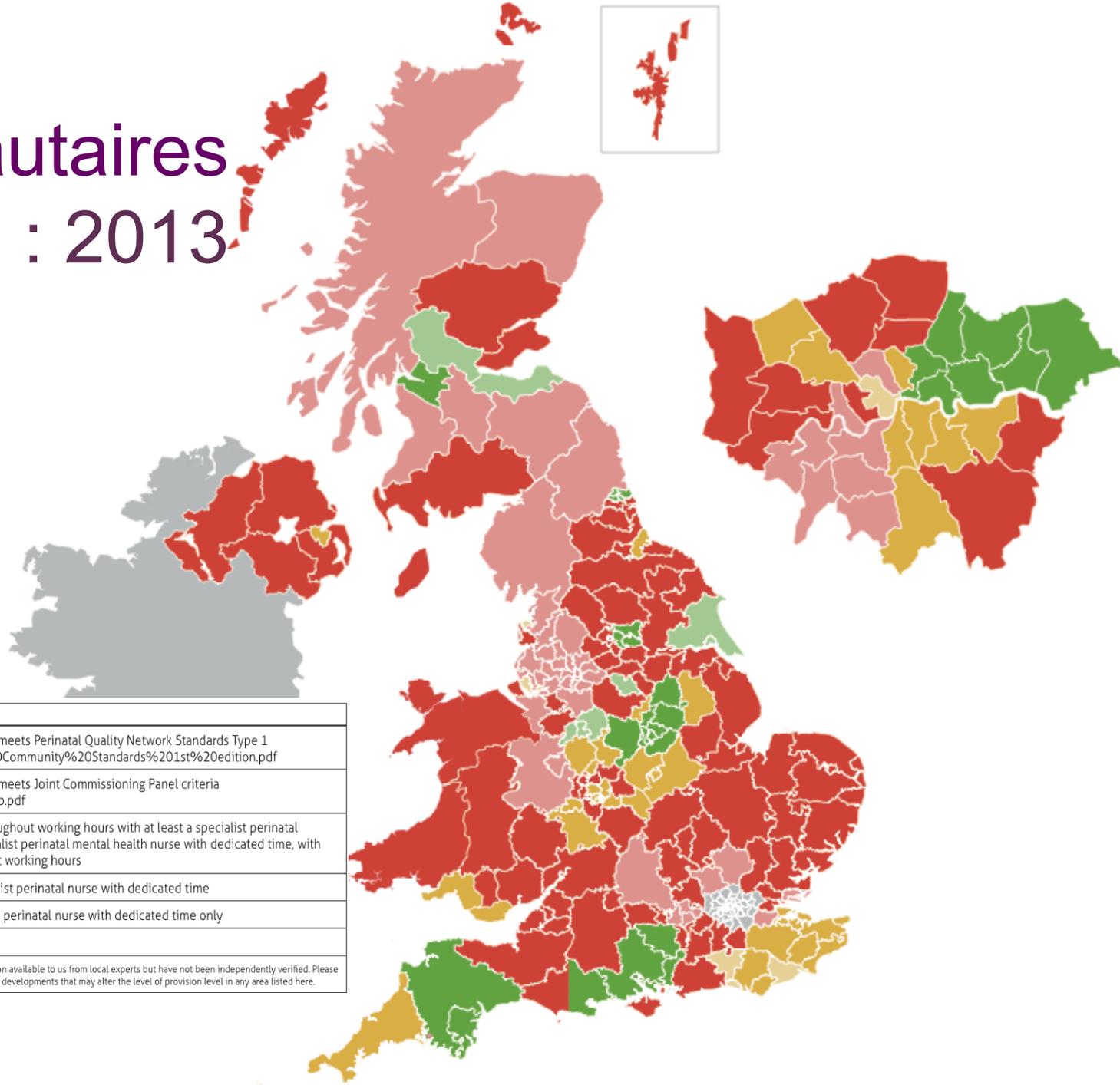
(Gavin et al 2015)



Unités  
Mère-Bébé  
manquent  
60 places



# Services communautaires perinatales : 2013



LEVEL	COLOUR	CRITERIA
5	Dark Green	Specialised perinatal community team that meets Perinatal Quality Network Standards Type 1 <a href="http://www.rcpsych.ac.uk/pdf/Perinatal%20Community%20Standards%201st%20edition.pdf">http://www.rcpsych.ac.uk/pdf/Perinatal%20Community%20Standards%201st%20edition.pdf</a>
4	Light Green	Specialised perinatal community team that meets Joint Commissioning Panel criteria <a href="http://www.rcpsych.ac.uk/pdf/perinata_web.pdf">http://www.rcpsych.ac.uk/pdf/perinata_web.pdf</a>
3	Yellow-Gold	Perinatal community service operating throughout working hours with at least a specialist perinatal psychiatrist with dedicated time AND specialist perinatal mental health nurse with dedicated time, with access to a perinatal psychiatrist throughout working hours
2	Light Yellow	Specialist perinatal psychiatrist AND specialist perinatal nurse with dedicated time
1	Light Red	Specialist perinatal psychiatrist or specialist perinatal nurse with dedicated time only
0	Dark Red	No provision

**Disclaimer** Levels of provision in this map have been assessed using the best information available to us from local experts but have not been independently verified. Please contact [info@everyonesbusiness.org.uk](mailto:info@everyonesbusiness.org.uk) if you suspect any inaccuracy or know of recent developments that may alter the level of provision level in any area listed here.

# Conditions nécessaires

- ☑ Appréhension correcte des besoins
- ☑ Guide des bonnes pratiques (NICE=HAS) et socle de preuves scientifiques
- Modèles réussis pour la prestation des soins
- Normes de qualité et système d'assurance
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# 'Guidelines'...tous en accord... et = nos objectifs!

Resources | Maternal Mental H x

everyonesbusiness.org.uk/?page\_id=24

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Antenatal and postnatal NICE Guidance CG451.pdf

Mental Health Experiences of Women and Health Professionals

Joint Commissioning Panel perinatal mental health services.pdf

Prevention in mind

Specialist mental health midwives.pdf

The costs of perinatal mental health problems

Summary Economic report - perinatal mental health

Falling through the Gaps - GP report

CCQI Perinatal Service Standards 2nd edition

CCQI Standards for Mother and Baby Units 4th Edition

Everyone's Business Campaign Independent Evaluation Report

Specialist Health Visitors in Perinatal & Infant Mental Health

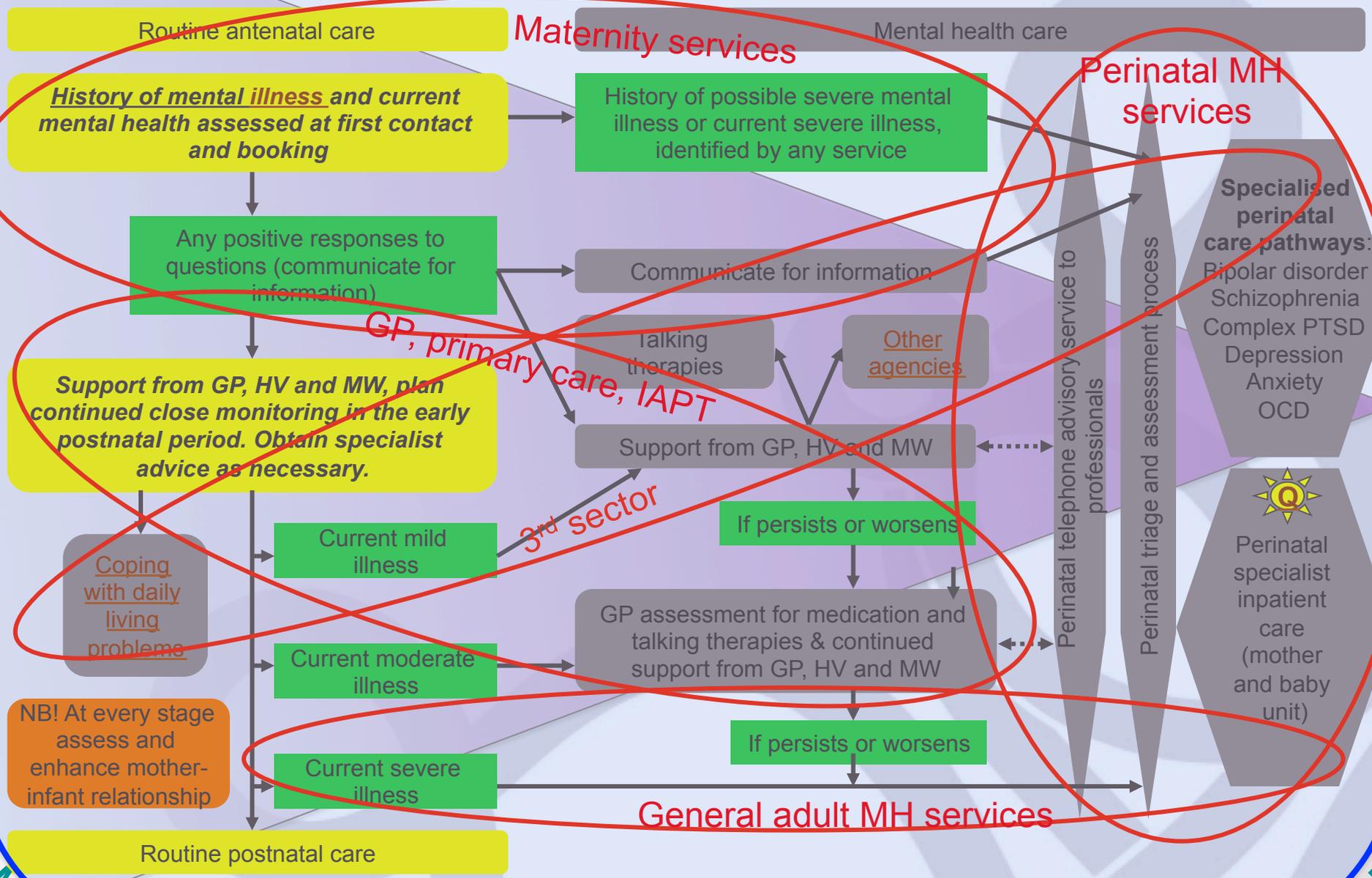
MBRRACE-UK Saving Lives, Improving Mothers' Care 2015 Lay Summary

MBRRACE-UK Saving Lives, Improving Mothers' Care 2015-16 and lessons learned to inform maternity care from the UK and Ireland Confidential Enquiry into Maternal Deaths and Morbidity 2008-13

# Conditions nécessaires

- ☑ Appréhension correcte des besoins
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# Parcours santé mentale pendant la grossesse



**Society: nurture families, fight ignorance, build resilience**

# Routine detection: primary care and maternity services (NICE)

- **at first contact, between 4 to 6 weeks and 3 to 4 months after delivery:** Whooley questions to identify possible depression
- **Current or past mental health problem: routine enquiries at all subsequent contacts.**

# Whooley – Arroll Questions

- During the last month, have you often been bothered by feeling down, depressed or hopeless?
- During the last month have you often been bothered by having little interest or pleasure in doing things?
- Is this something you feel you need or want help with?
- Sensitivity 96%, specificity 57%



# Cartographie du parcours entier vers parité, équité, qualité

AH29		Home	Layout	Tables	Charts	SmartArt	Formulas	Data	Review	Search in Sheet																								
A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	AB	AC	AD	AE	AF	AG	AH	
	Area	Specialist Perinatal Community Team	Specialist Midwife for Mental Health	Health Visitor Leads / Champions for Perinatal Mental Health	MH Community Team Leads / Champions for Perinatal Mental Health	Trauma services	Groups	Third Sector map of services	Peer Support	Family Nurse Partnership	MHT - women who are pregnant or in first postnatal year are not tracked	Perinatal mental health training for Midwifery students	Perinatal mental health training for Health Visitor students	All disciplines including ambulance service, GPs and Police - Perinatal Mental health training to existing workforce	Specialist Perinatal Team Nurses	Specialist Perinatal Team Nurses	Specialist Perinatal Team Consultant	Specialist Perinatal Team Consultant	Specialist Perinatal Team Consultant	Specialist Perinatal Team Nurse	Specialist Perinatal Team Nurse	Specialist Perinatal Team Social Worker	Specialist Perinatal Team Social Worker	Specialist Perinatal Team Admin	Specialist Perinatal Team Admin	Specialist Perinatal Team Manager	Specialist Perinatal Team Manager	Prevention pathway agreed	Prevention pathway agreed	Mild / moderate pathway agreed	Mild / moderate pathway agreed	Moderate / severe pathway agreed	Moderate / severe pathway agreed	
0 (2016)	Hampshire		Some parts covered by University Hospital Southampton / other Trusts, Hampshire Hospitals (Winchester, Basingstoke) have no specialist midwife currently but are working towards	Some areas - need to map and gaps filled			Groups need mapping			Basingstoke, Bournemouth, Havant and Gosport		Clarify Southampton Unit midwifery training (Romsey, New Forest), otherwise green for Southampton Un		Don't know, some South Central Ambulance Services have specialist mental health nurse cover													Screening by midwives / Health Visitors and GPs. The pathway beyond the screening part needs looking at		Screening by midwives / Health Visitors and GPs. The pathway beyond the screening part needs looking at					
	UK Southampton			Sue Adams			STOPS, PND Groups																											
2830	UK Portsmouth												Need detail																					
8000	East Dorset	Yes	Yes	No	No	Donnet action on abuse - was 18 months waiting list, now means tested	No, inpatient only	Donnet action on abuse - was 18 months waiting list, now means tested	No	Available	Available, but not accessed by Dorset midwives widely and not for undergraduates	Ad-Fac training on GP training	Ad-Fac to GPs on GP training	0.6 who appointed, need further 1.4 w/e	Commencing April 2016	Commencing April 2016	Inpatient, except 1 community									Service Manager, no Team Leader	Pathway present, but being updated following task and finish group	Pathway present, but being updated following task and finish group	Pathway present, but being updated following task and finish group	Pathway present, but being updated following task and finish group				
8000	West Dorset	Yes, recently appointed			No	Donnet action on abuse - was 18 months waiting list, now means tested	No, inpatient only	Donnet action on abuse - was 18 months waiting list, now means tested		Available	Available, but not accessed by Dorset midwives widely and not for undergraduates	Ad-Fac training on GP training	Ad-Fac to GPs on GP training	0.6 who appointed, need further 1.4 w/e	Commencing April 2016		1 community									Service Manager, no Team Leader	Pathway present, but being updated following task and finish group	Pathway present, but being updated following task and finish group	Pathway present, but being updated following task and finish group	Pathway present, but being updated following task and finish group				
14000	Isle of Wight							Mental Health Alliance	MH peer support, not specifically perinatal		Bournemouth Uni, not once qualified	Southernampton Uni, ad-fac once qualified		Working towards this													Pathways to be developed	Pathways to be developed	Pathways to be developed					

<http://maternalmentalhealthalliance.org/mumsandbabiesinmind/mabim-tools/>

# Fonctions d'un service périnatal

- Unités Mère Bébé (MBU) pour les plus gravement malades
- Service de 'communauté' (proximité/ d'aide à la personne) pour mères + bébés (-9 à +12 mois) + familles
- Parcours pour prévision, prévention, détection, traitement
- Conseils, formations, collaboration pour tous les professionnels



*Winchester MBU*

*Service à domicile Périnatal de Hampshire :  
infirmières, puéricultrices, psychiatres, psychologues,  
secrétaires...  
16,000 naissances/an*



*'Just do it!'*

# Réduction de la stigmatisation, diffusion des informations et amélioration des soins



# Cliniques par téléphone: efficace, accessible, et rentable

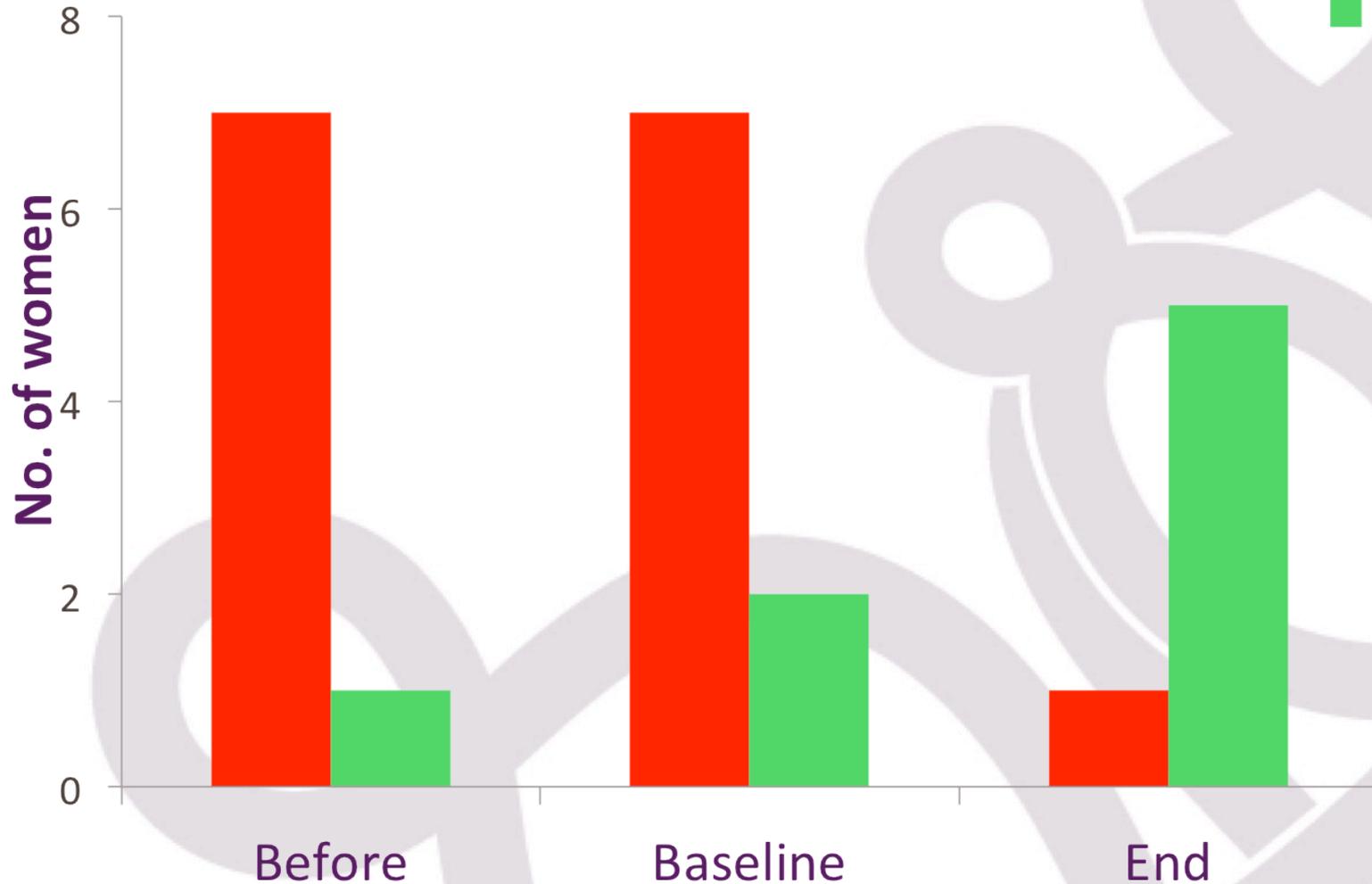


# Telephone Groups

Women scoring above/below EPDS cut off

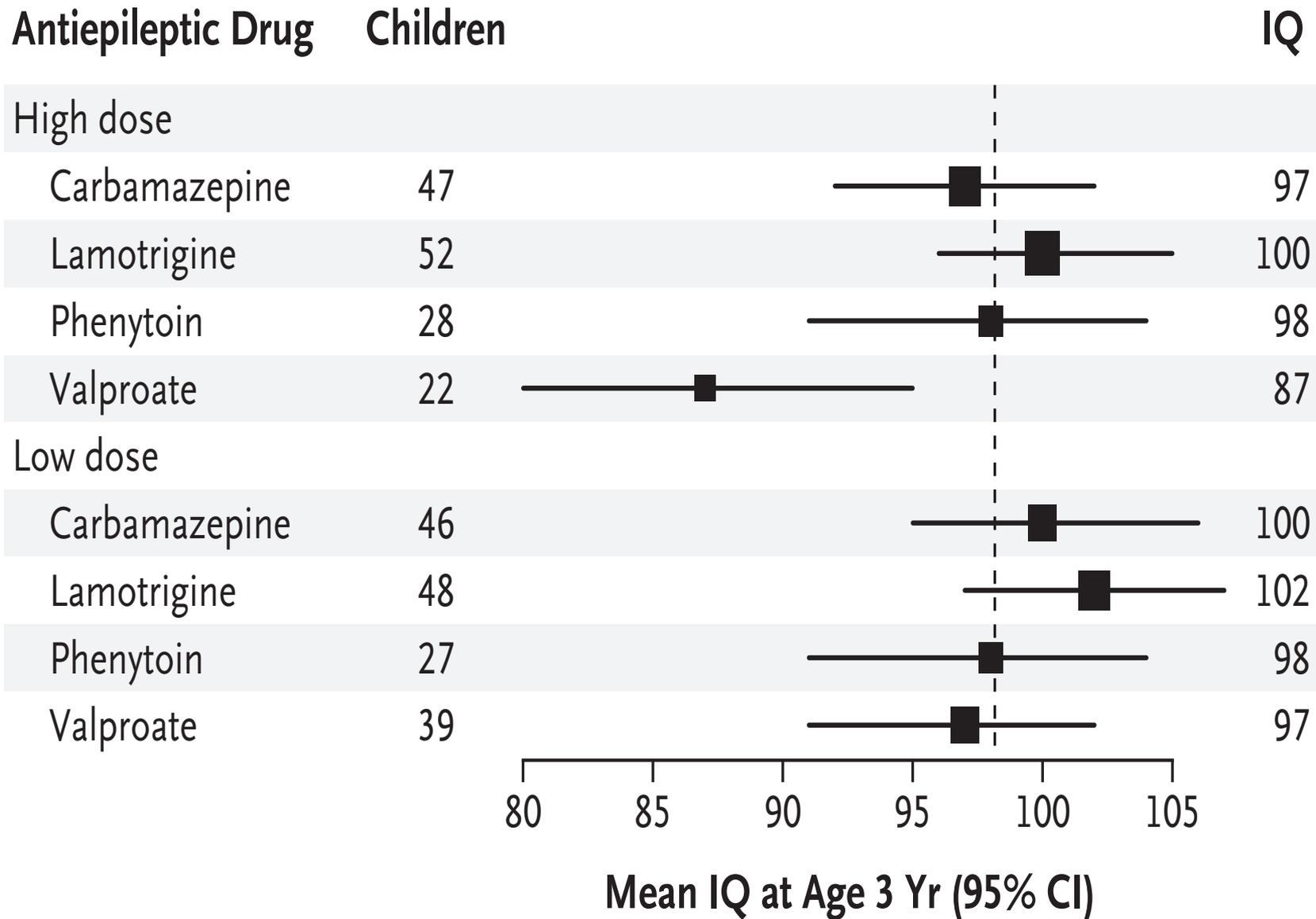
■ >12

■ <12



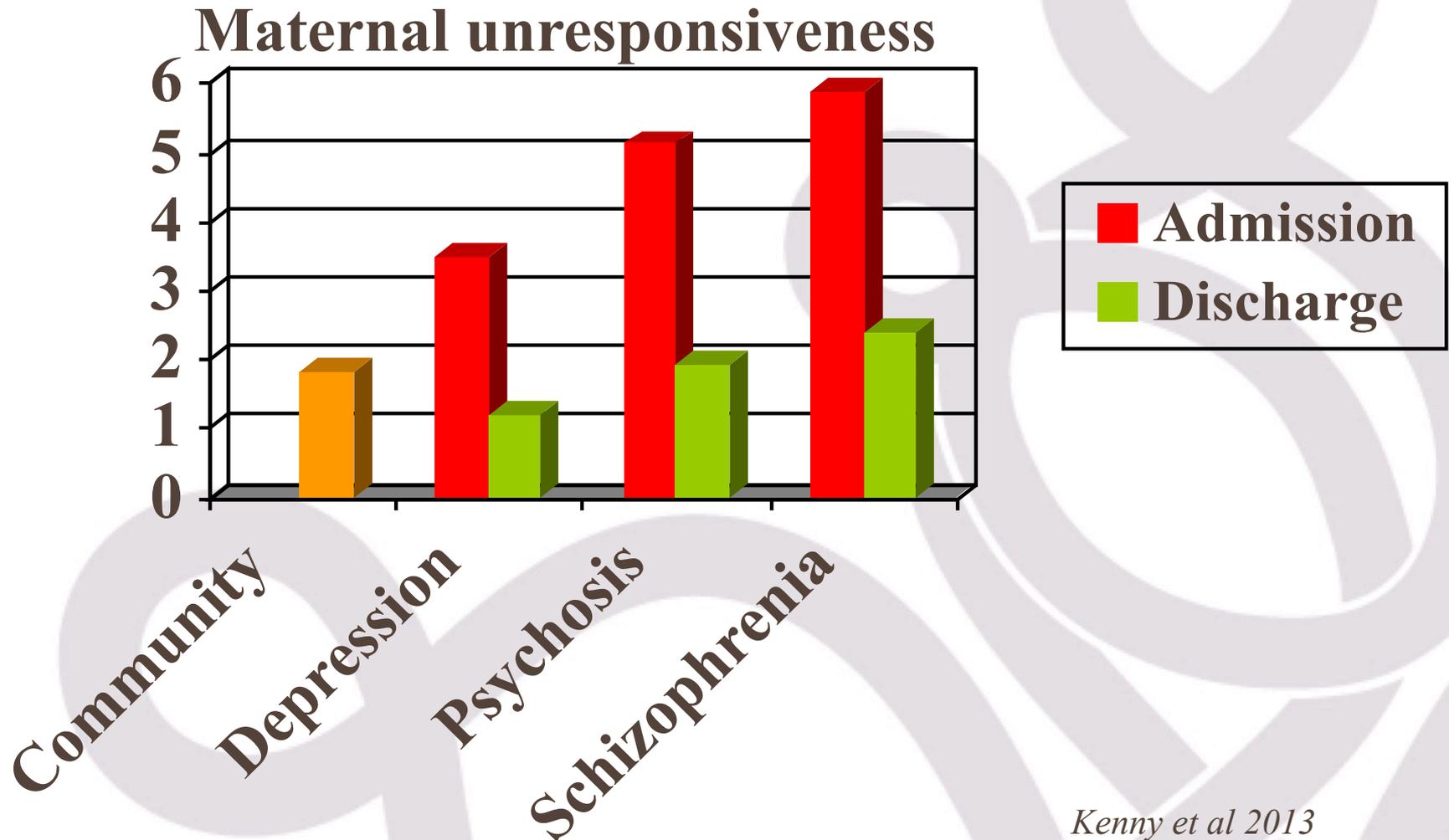
# 'Video Interactive Guidance' à l'hôpital et a domicile





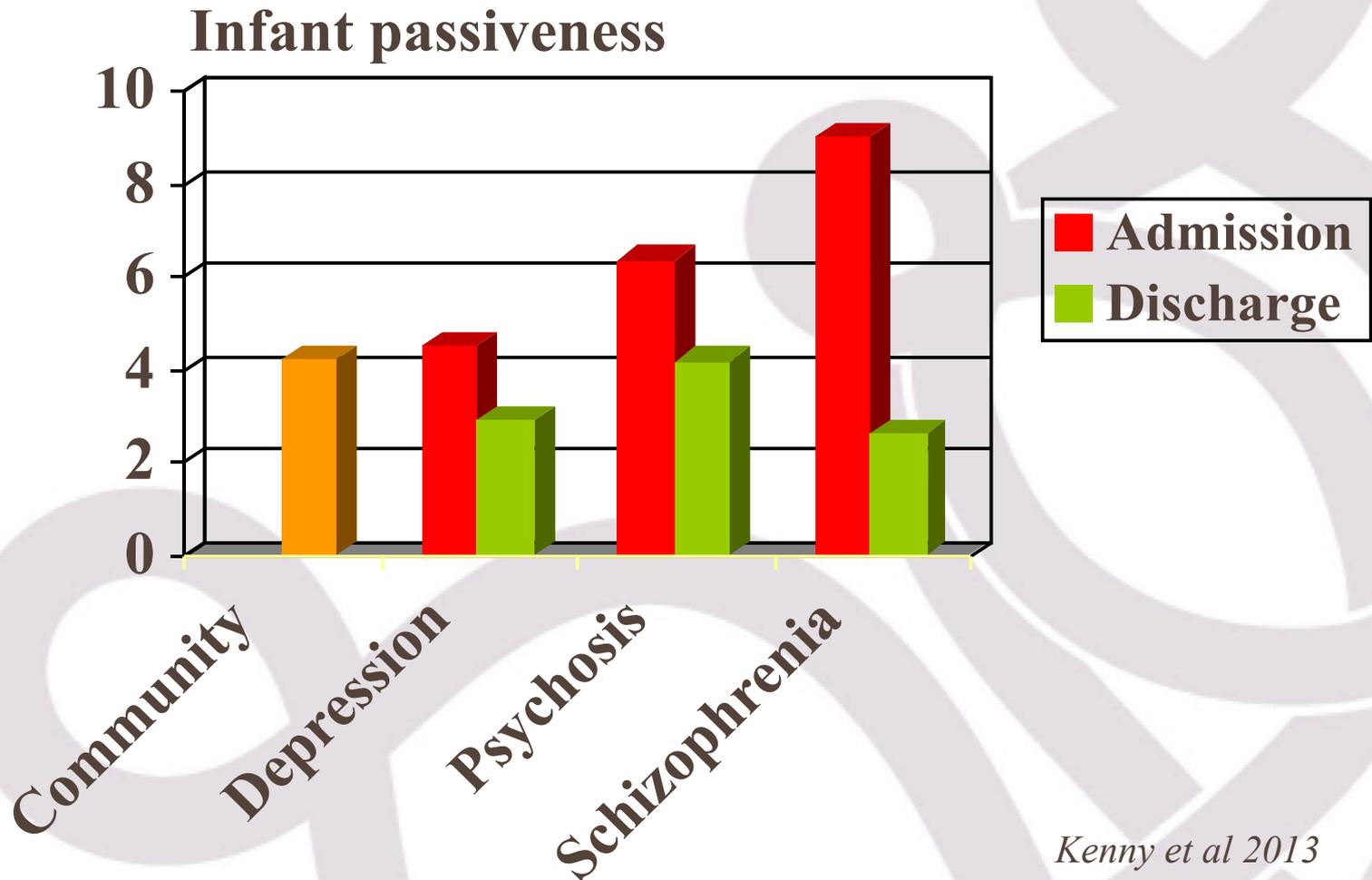
# Insensibilité maternelle

(inférieur = mieux)



# Passivité infantile

(inférieur = mieux)



# Conditions nécessaires

- ☑ Appréhension correcte des besoins
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PERINATAL  
QUALITY NETWORK FOR PERINATAL  
MENTAL HEALTH SERVICES



## **Hampshire Perinatal Mental Health Team**

**Peer Review Summary- Cycle 2**

*Editor: Hannah Rodell*

**Date:** July 2014

**Trust Name:** Southern Health NHS Foundation Trust

# Conditions nécessaires

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## The costs of perinatal mental health problems

Annette Bauer, Michael Parsonage, Martin Knapp,  
Valentina Lemmi & Bayo Adelaja



“Half the good guys in the Conservative party end up grumpy and disappointed”

Douglas Carswell interview → g2

£1.60

Monday 20.10.14  
Published in London  
and Manchester  
theguardian.com

Newspaper of the year  
Winner of the  
Pulitzer prize

# £8bn cost of mental illness in maternity

Report shows huge annual toll of inadequate care for new mothers

Peter Walker

Substandard mental health care for pregnant women and new mothers is creating long-term costs of more than £8bn every

of these serious and long-term human and economic costs could be avoided.”

The report finds significant gaps in the detection of mental health problems in the period before and after birth, saying

# Coûts (LSE, 2014)

Si nous continuons...



**£8.1bn**

£337m



Si nous agissons

# Equivalence avec les soins de santé physique durant la maternité (parité)

- Soins (physiques) de maternité= £2800/femme
- Psychiatrie périnatale partout= £67/femme
- Soins de maternité = £2.6bn
- Soins santé périnatale, parcours entier = £0.34bn

**Si nous continuons... coûts £8.1bn**

# Conditions nécessaires

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- ☑ **Consensus et soutien actif de tous les intervenants**



ational Support Organisations  
Support by UK Area

#everyonesbusiness

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[dropdown menu]  
[dropdown menu]  
[input field] \*

criptions  
checkbox if you want to be  
al campaign materi-  
[button]

## Real Life Stories



*July 2, 2014*  
**Jenny's story**  
Jenny's story (Belfast) Four years ago I had my second child, Isaac. After he was born, I felt differently to how I had felt when his older brother, Sam, had been born. Something wasn't right. I felt depressed and struggled to bond with Isaac. I also



*July 2, 2014*  
**Raj's story**  
Raj's story (Berkshire) My wife developed stress-induced psychosis when she was nearly 30 weeks pregnant. At the time, she saw me as an antagonist, and due to her condition I was subjected to mental and verbal abuse as my wife's perception of

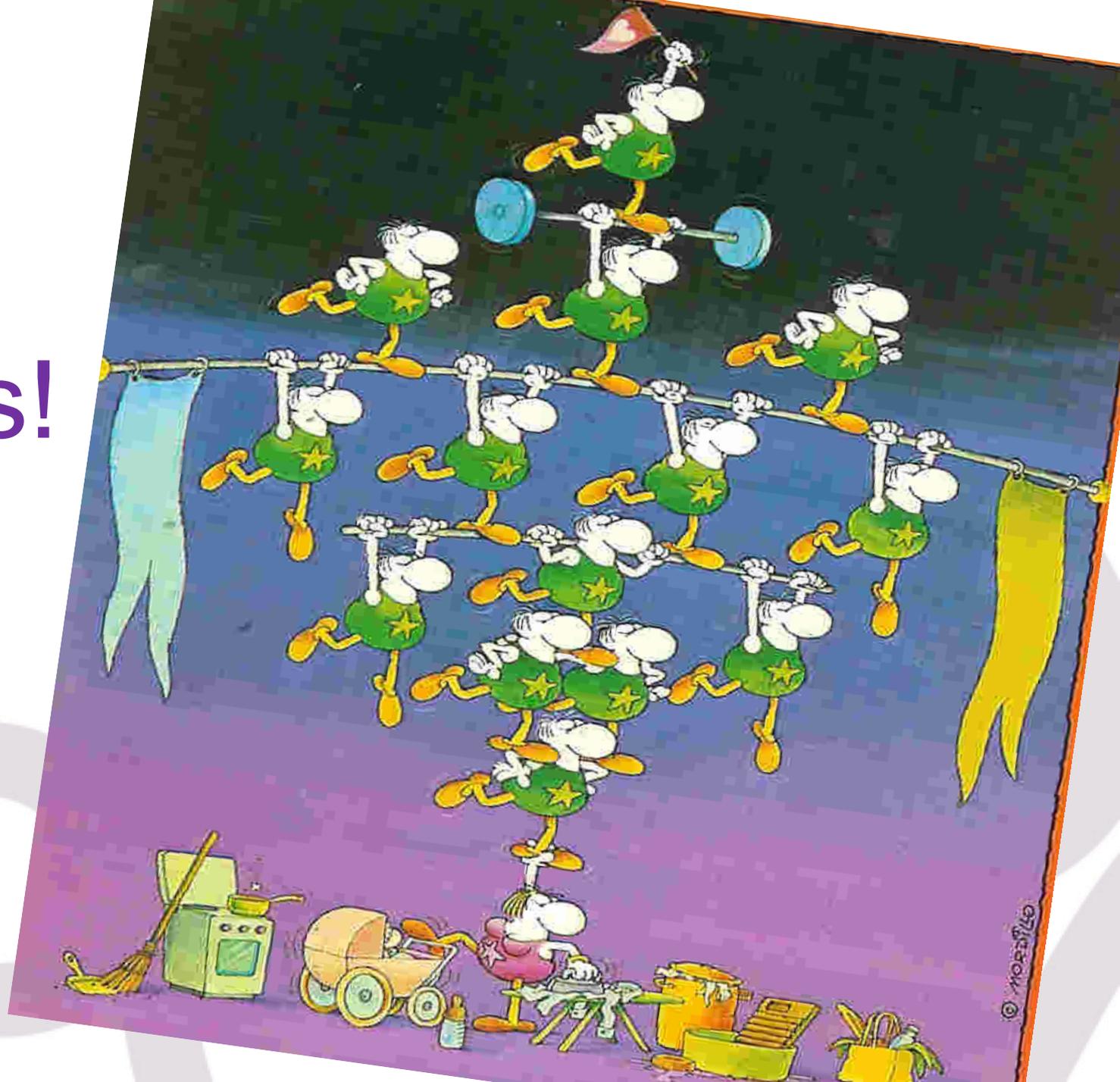


*June 26, 2014*  
**Louise's story**  
Louise's story (Oxfordshire) I suffer from bipolar disorder and was treated with lithium. For five years my husband and I had raised with my psychiatrist the issue of us trying for a family, but she kept failing to find out about what changes to medication

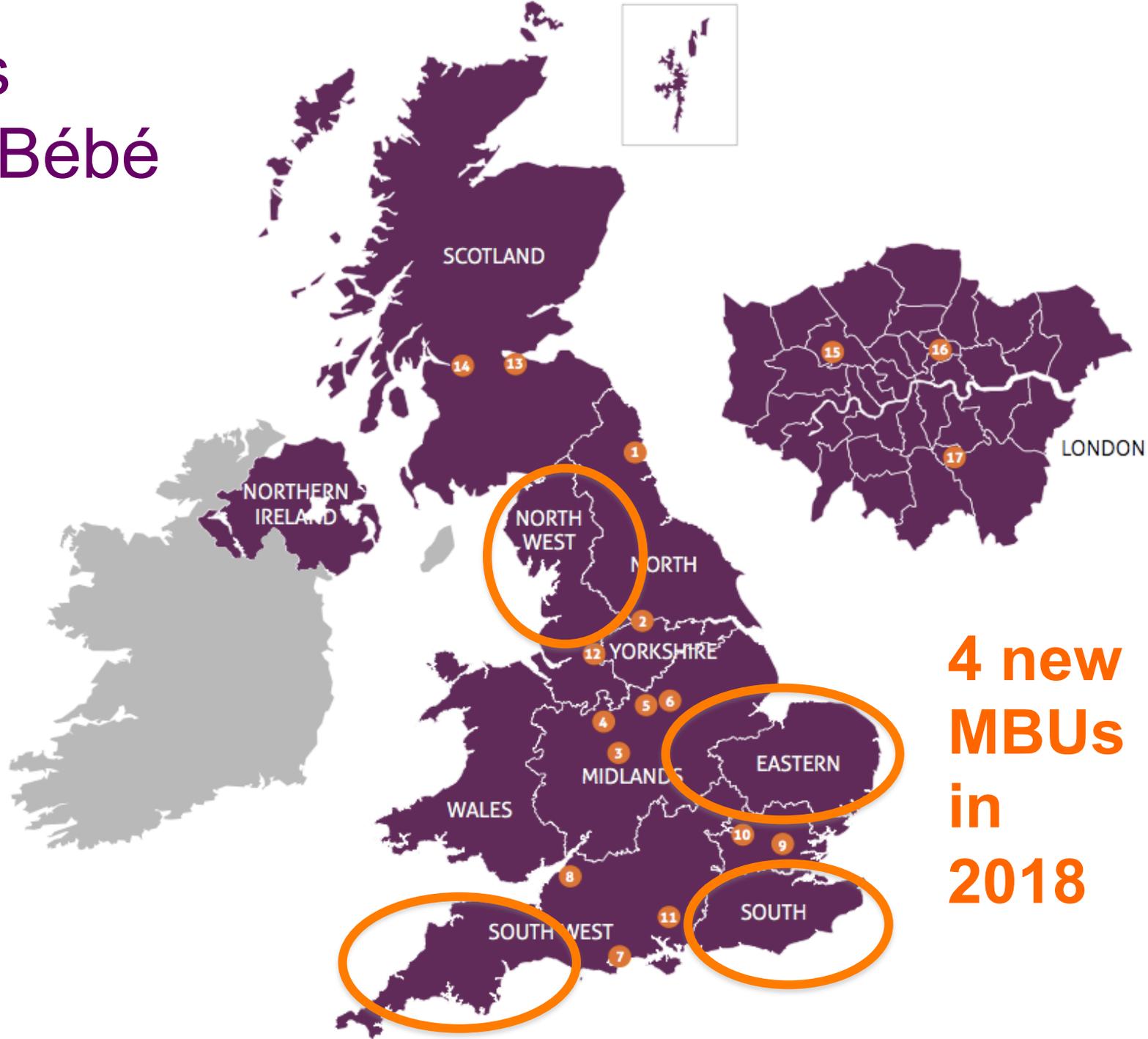


*June 26, 2014*  
**Ann's story**  
Ann's story (Hertfordshire) After my daughter's birth I suffered from severe antenatal obsessive compulsive disorder [OCD] and lived with a crippling fear that something terrible was going to happen to her. At a time when I should have been enjoy-

Unité  
=  
succès!

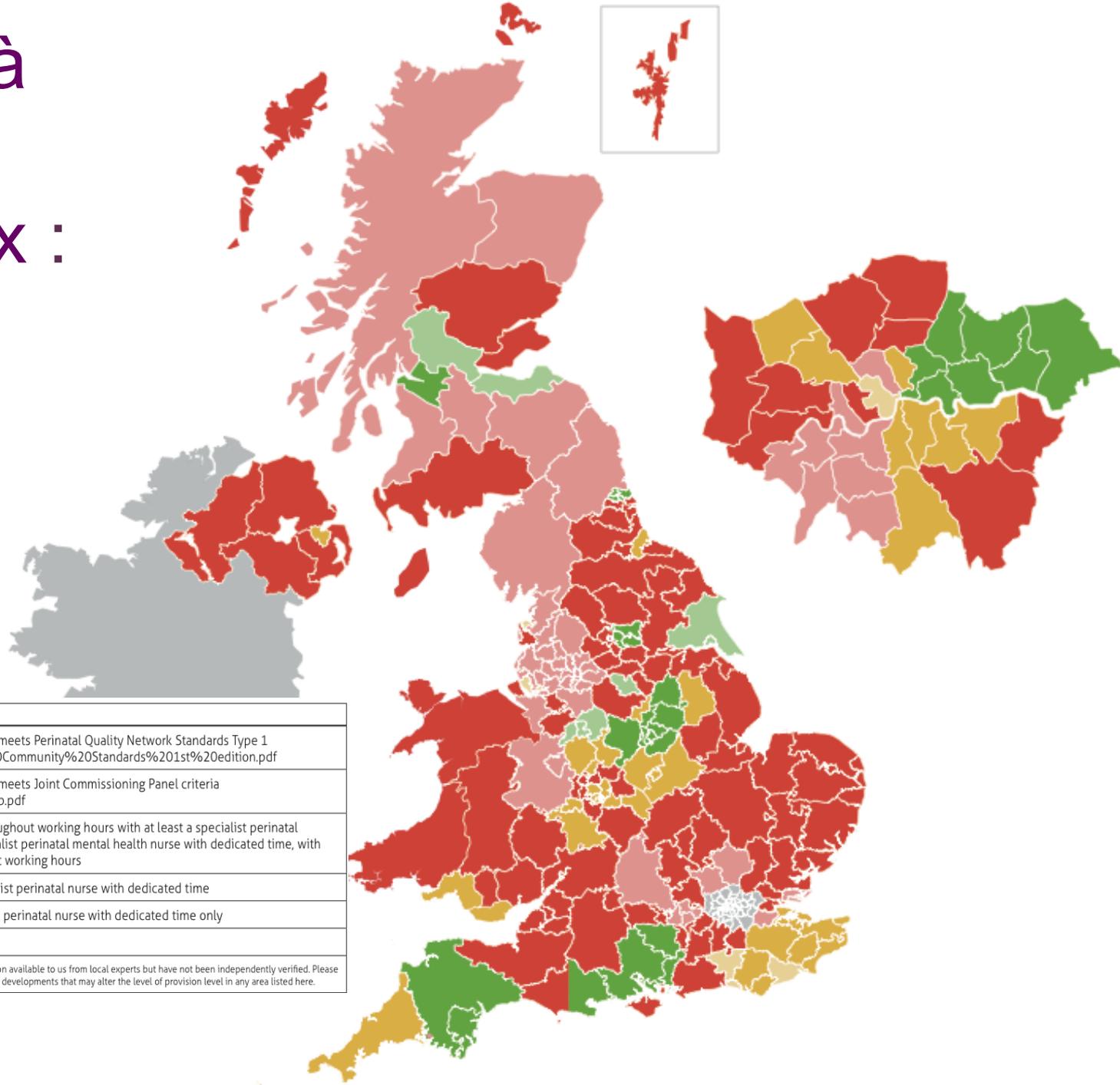


# Unités Mère-Bébé



**4 new  
MBUs  
in  
2018**

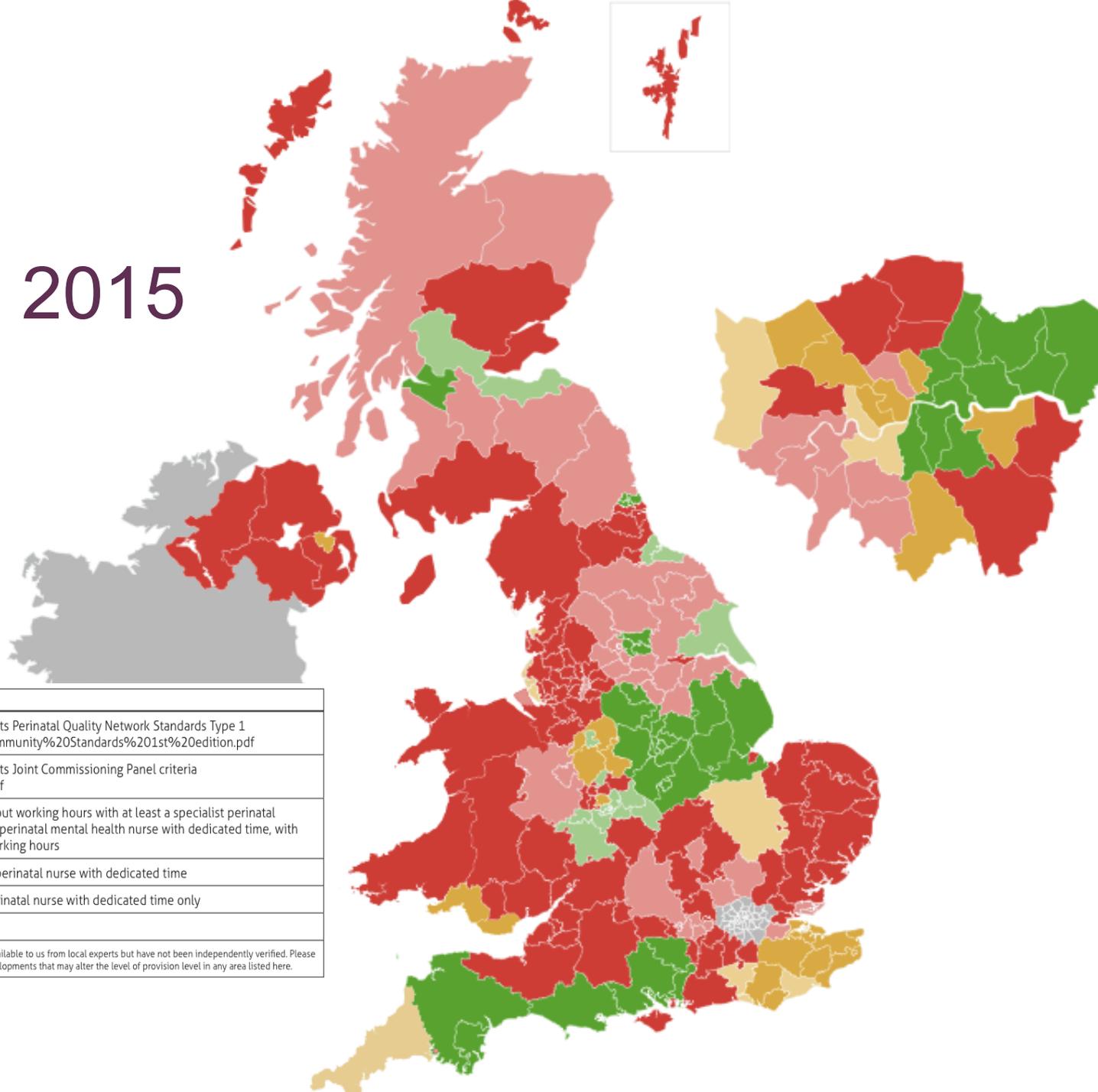
# Services à domicile perinataux : 2013



LEVEL	COLOUR	CRITERIA
5	Dark Green	Specialised perinatal community team that meets Perinatal Quality Network Standards Type 1 <a href="http://www.rcpsych.ac.uk/pdf/Perinatal%20Community%20Standards%201st%20edition.pdf">http://www.rcpsych.ac.uk/pdf/Perinatal%20Community%20Standards%201st%20edition.pdf</a>
4	Medium Green	Specialised perinatal community team that meets Joint Commissioning Panel criteria <a href="http://www.rcpsych.ac.uk/pdf/perinata_web.pdf">http://www.rcpsych.ac.uk/pdf/perinata_web.pdf</a>
3	Yellow	Perinatal community service operating throughout working hours with at least a specialist perinatal psychiatrist with dedicated time AND specialist perinatal mental health nurse with dedicated time, with access to a perinatal psychiatrist throughout working hours
2	Light Brown	Specialist perinatal psychiatrist AND specialist perinatal nurse with dedicated time
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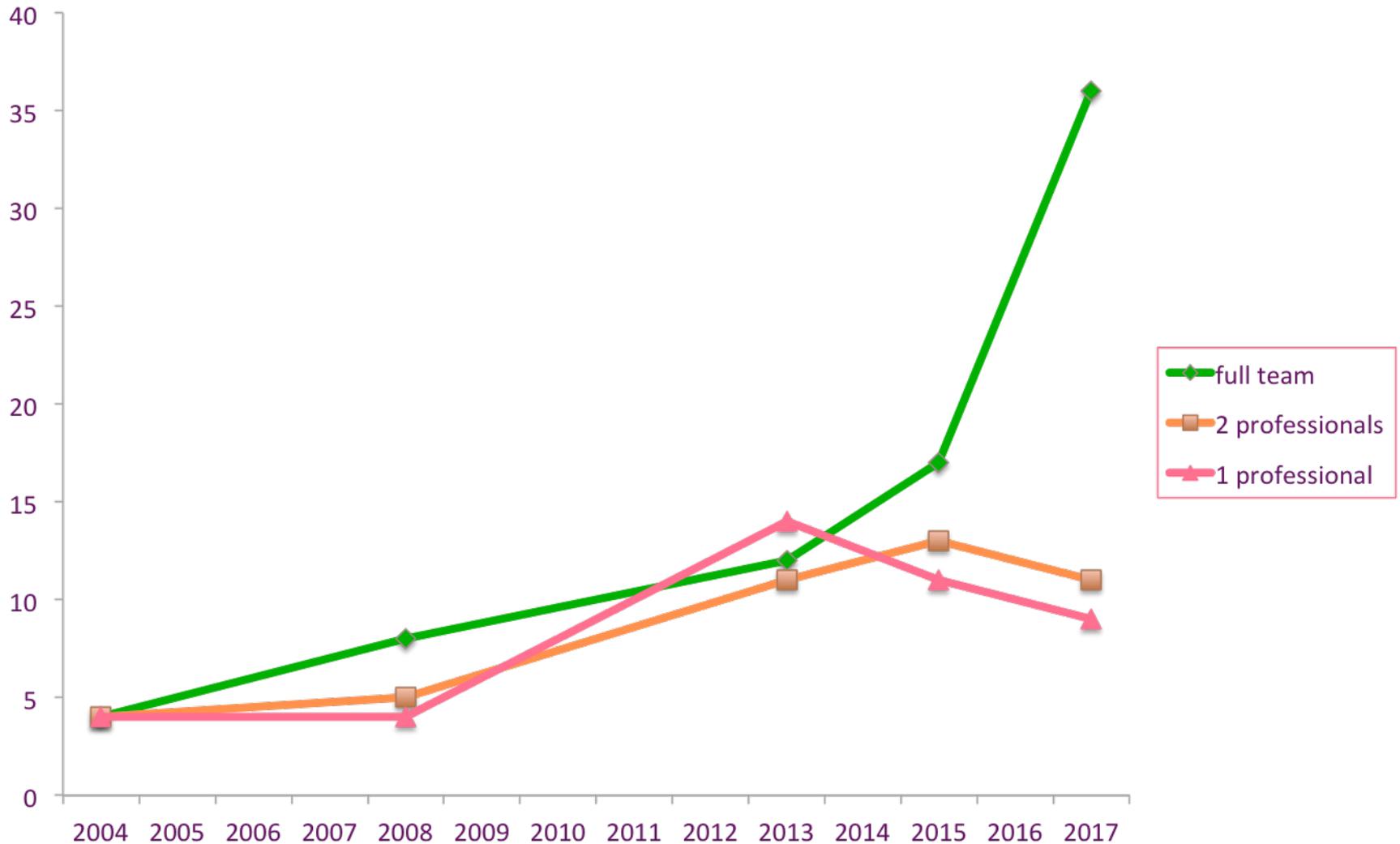
# Services à domicile perinataux: 2015



LEVEL	COLOUR	CRITERIA
5	Dark Green	Specialised perinatal community team that meets Perinatal Quality Network Standards Type 1 <a href="http://www.rcpsych.ac.uk/pdf/Perinatal%20Community%20Standards%201st%20edition.pdf">http://www.rcpsych.ac.uk/pdf/Perinatal%20Community%20Standards%201st%20edition.pdf</a>
4	Light Green	Specialised perinatal community team that meets Joint Commissioning Panel criteria <a href="http://www.rcpsych.ac.uk/pdf/perinatal_web.pdf">http://www.rcpsych.ac.uk/pdf/perinatal_web.pdf</a>
3	Yellow/Gold	Perinatal community service operating throughout working hours with at least a specialist perinatal psychiatrist with dedicated time AND specialist perinatal mental health nurse with dedicated time, with access to a perinatal psychiatrist throughout working hours
2	Light Yellow	Specialist perinatal psychiatrist AND specialist perinatal nurse with dedicated time
1	Light Red/Pink	Specialist perinatal psychiatrist or specialist perinatal nurse with dedicated time only
0	Red	No provision

**Disclaimer** Levels of provision in this map have been assessed using the best information available to us from local experts but have not been independently verified. Please contact [info@everyonesbusiness.org.uk](mailto:info@everyonesbusiness.org.uk) if you suspect any inaccuracy or know of recent developments that may alter the level of provision level in any area listed here.

# L'équité est possible!

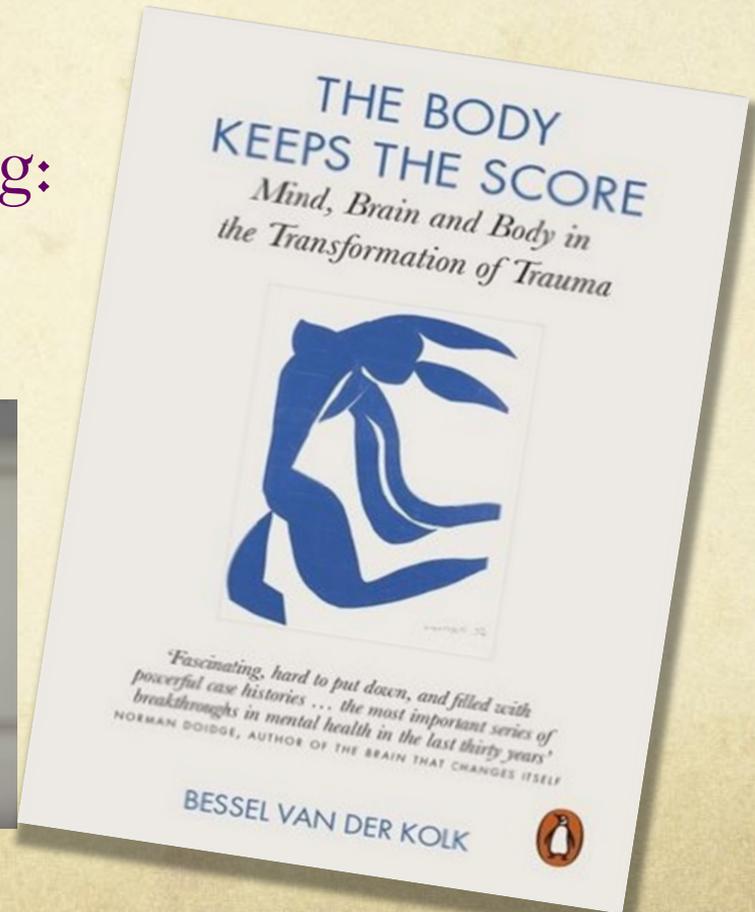


PLEASE HAVE A LOOK AT THE LINKS IN PREVIOUS SLIDES AND THE FOLLOWING

a video worth watching:

<https://www.youtube.com/watch?v=53RX2ESIqsM>

and a book worth reading:



# ...AND SOME MORE

