

Perinatal Support Service

Delivered by **Family Action** from **April 2015 - March 2024**

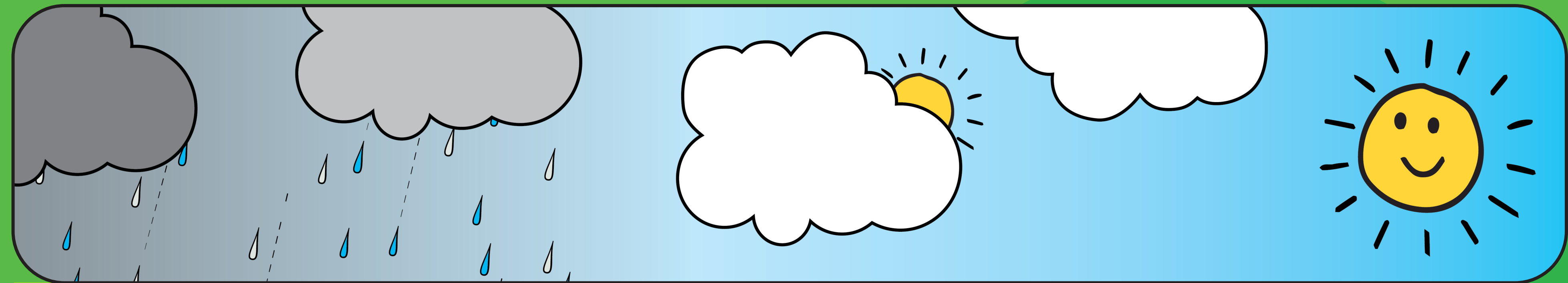
The Perinatal Support Service offers emotional support to families during pregnancy and the first year of their child's life where the mother or primary carer has been diagnosed with a low to moderate level of perinatal mental illness, including anxiety and social isolation, or are recognised as being at risk of developing them. It is especially effective when combined with the Theraplay-based group programme, My Baby and Me, which focuses on interaction between parent and baby.

The offer is based around peer support, with volunteer peer supporters recruited from local communities, many of whom have lived-experience of birth and parenting.

☀️ How it was delivered

Following a thorough assessment, women and birthing people were carefully matched with trained volunteer peer supporters who provided tailored emotional support through listening support sessions, also helping them access other services in the community.

Volunteers were trained in active listening skills and rapport building, to create a safe space where parents/carers could share their thoughts and feelings, and experience improved emotional wellbeing.



319
women and
birthing people
received support

149
VOLUNTEERS
were recruited
and trained

36%
of volunteers
progressed into
employment or
full-time education

Project staff and
volunteers offered
support in 32
languages between
them, enabling
families with limited
English language skills
to receive support

☀️ Why this project was developed

Depression and/or anxiety can lead to unresponsive parenting and reductions in the quality of parent-child relationships. These, in turn, are a significant risk factor for poor social, emotional and behavioural development in infants.

This project was designed to target this specific chain of risk.

☀️ The project aimed to:

- Increase resilience and long-term coping strategies of participant parents/carers and their infants
- Improve the mental health of participant parents/carers
- Improve emotional attachment between participant parents/carers and their infants
- Reduce social isolation of participant parents/carers and families
- Increase self-confidence and future employment opportunities of volunteer befrienders and participants

☀️ Impact and findings*

- The assessments collected included the Patient Health Questionnaire 9 (PHQ9), which is a measure of depression, and the Generalised Anxiety Disorder Assessment 7 (GAD7) which is a measure of anxiety:
 - For the PHQ-9 measure, the average score before receiving support was 11.69 (SD = 5.02). This had decreased to 5.72 (SD = 3.92) at the end of support. This is a reduction of 5.97 points and was found to be statistically significant (indicated by the 95% confidence intervals of the score distributions).
 - For the GAD-7 measure, the average score was 11.28 (SD = 4.17) before receiving support and 6.15 (SD = 3.89) at the end. This is a reduction of 5.13 points and was also found to be statistically significant.
 - Scores above 10 on either measure indicate clinically-relevant symptoms, suggesting that the project was seeing women with mental health needs.
 - The change in scores observed for both the PHQ-9 and GAD-7 from the start to end of support indicates a shift from clinically-relevant to mild symptoms.

While these findings don't tell us about the effectiveness of the project, they do suggest that receiving support from the service may have reduced symptoms of depression and anxiety for women.

- Participants who completed the My Baby and Me sessions all had improved Maternal Postnatal Attachment Scale (MPAS) scores - an average of 5%. They also reported that their understanding of their baby's cues and communication had improved by on average 5/10. (Average understanding before the group sessions was 4/10, average understanding after the sessions was 9/10).
- Over a third of volunteers (36%) progressed into employment or full-time education after leaving the service. Given that 72% of appointed volunteers were motivated to take the role as work experience, this suggests that volunteering with the project offered a golden opportunity to develop the skills and confidence to pursue further professional development.
- The project saw a decrease in the number of active volunteers since the COVID-19 pandemic and cost-of-living crisis, however this did not have a detrimental effect on the support offered as there was an increase in requests for remote support.
- The service was upscaled as part of the district-wide Start for Life programme, leading notably to an increase in referrals within the Better Start Bradford area.

*This section includes information from both the evaluation report/s and project

