POLICY BRIEF

# Maternal Mental Health

Bernard van Leer O FOUNDATION

THINGS TO R

# In brief

Mental health determines how mothers understand, respond to and interact with children, which can have a profound impact on a child's development and future health. Millions of mothers around the world suffer with mental health issues, but the right interventions can help them and their developing child onto a healthy track.

#### **3 THINGS TO REMEMBER**

- Mental health problems during and after pregnancy can harm child development in several ways
- Poverty, instability and childhood trauma increase the risk of maternal depression
- Combining interventions like early screening, home-visiting and therapy can help mothers cope

#### What do we know?

The mental health of mothers – or other primary caregivers – impacts early childhood development in various ways. Importantly, this begins before the child is even born.

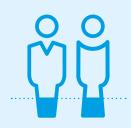
During pregnancy, for example, maternal distress can reduce the placenta's ability to protect the baby from elevated levels of the stress hormone, cortisol. This is linked to a number of negative child outcomes, such as a higher risk of health problems in later life, and difficulties learning and developing healthy relationships.<sup>1</sup>

Following birth, parents and other caregivers displaying signs of mental health problems like depression, anxiety and stress are significantly less likely to engage in positive and interactive parenting practices.<sup>2</sup> These "serve and return" activities – such as games like "peek-a-boo" – are vital in promoting healthy brain development.<sup>3</sup> As well as mothers, the mental health of fathers can impact each child's health.

Despite these findings, research on the impact of mental health issues on children is still quite nascent, and there is much more to discover.



#### In numbers



15 - 23% of children live with a parent with a mental illness<sup>4</sup>

# 

1 in 5 mothers in developing countries experience depression after childbirth<sup>5</sup>



< \$10 per woman per year: cost of helping mothers with depression in Pakistan<sup>6</sup>

## Why does it matter?

Mental health problems like stress, anxiety and depression are damaging the development of millions of children around the world, and they tend to be transferred down generations. So what causes these issues?

The roots of mental health problems are numerous and complex. As well as the biological and psychological causes, they can often be impacted by environmental factors like the support networks people have in place, and stressors such as safety and noise.

Maternal mental health is a problem in all parts of the world. However, it tends to be most severe in communities which experience poverty, conflict or marginalisation, due to the added stressors they entail. Mental health issues are particularly prevalent in humanitarian situations, for example.



As this diagram<sup>7</sup> shows, a structural issue like poverty can create an intergenerational cycle of bad child outcomes and future maternal depression – with one leading to the other.

When people become parents, they often replicate their own upbringing; their "ghosts in the nursery."<sup>8</sup> If their parents had mental health issues, it can decrease the likelihood of a nurturing relationship with their own child years later.

#### **KEY ISSUES**

- Prenatal & postpartum depression
- Intergenerational poverty
- Childhood trauma
- Mental health stigma

### What can policymakers do?

In response, there are a number of ways to support mothers and other caregivers in coping with their mental health challenges. By intervening early, stress can be minimized during pregnancy, and they can forge nurturing relationships with their children.

# Here are some of the most important interventions:

SCREENING to identify parents at risk as early as possible. The earlier caregivers receive help, the better for them and their child.

ONGOING HEALTHCARE SUPPORT such as home-visiting programmes for those in need, providing individualised care and promoting quality mother-child interactions.

COUNSELLING from pregnancy onwards, helping mothers cope with their stress or trauma, building strategies with tools like mindfulness and peer support.

IMPROVING BUILT ENVIRONMENTS to minimise stressors and encourage child development, such as building open play spaces and limiting traffic.

Combining these interventions and integrating them into existing public services – such as through community health workers, nurses or midwives – can be an effective way of getting mothers the help they need. This is a key strategy in the Bernard van Leer Foundation's **Parents+** initiative, bundling coaching in early childhood development for parents with basic services for families.



**StrongMinds** in Uganda has created a community-based model to treat depression in women. Over a 12-week course of group interpersonal psychotherapy, participants learn to address the root causes of their depression and overcome depressive triggers. 82% of women treated no longer had depression after receiving therapy, and the charity's goal is treat two million women by 2025.<sup>9</sup>



In the United Kingdom, the **National Health Service** (NHS) has introduced mental health checks for new fathers.<sup>10</sup> If needed, they can be signposted to professional such as peer support or therapy. First-time fathers' mental health conditions can negatively impact children's mental health.<sup>11</sup>

#### CASE STUDY

# The Thinking Healthy Programme (THP)

SCALING CARE FOR MOTHERS WITH DEPRESSION

#### THE PROBLEM:

Low- and middle-income countries have high levels of maternal depression, but not enough specialists to treat mothers.

#### THE SOLUTION:

THP integrates cognitive behavioural therapy techniques into the routine work of community health workers.

#### THE IMPACT:

In rural Pakistan, 4,000 women were screened to identify 903 with perinatal depression. Treated by THP, 3 out of 4 women recovered.<sup>12</sup>

HOW DOES IT WORK? THP trains community health workers or volunteers in behavioural therapy techniques to reduce perinatal depression. Lasting 5-7 days, the training covers interventions such as active listening and collaborating with the family. Mothers with depression receive 16 sessions of therapy from pregnancy until a year after birth.

# "

"Because of this huge treatment gap, community health workers or peers are a beacon of hope."

> - Siham Sikander, Director, Human Development Research Foundation

THP has shown that community workers can treat mothers, and for less than \$10 per mother.<sup>13</sup> As a result, it has the potential to grow quickly, but training and supervising those workers at scale remains a substantial challenge.

In response, researchers in Pakistan have successfully trialled the use of tablet-based technology for training, which includes images, voiceovers and role playing. This means fewer specialists are needed to train workers, which



could boost the programme's reach. Pakistan has 115,000 Lady Health Workers who cover 85% of the rural population.<sup>14</sup>

The World Health Organization (WHO) has adopted THP for global dissemination, through its Mental Health Gap Action Programme (mhGAP). THP is already being replicated in a number of other developing countries, including India and Vietnam.

#### READ MORE

#### **The Brookings Institution**

The Power of Love: Why maternal depression is an economic mobility issue

https://www.brookings.edu/research/the-power-of-love-why-maternal-depression-is-an-economic-mobility-issue/

 For: understanding the socioeconomic impact of maternal depression

#### **The Lancet**

Maternal depression and mental health in early childhood

https://www.thelancet.com/journals/lanpsy/article/PIIS2215-0366(16)30148-1/fulltext#relatedClinic

For: digging deeper into the evidence on maternal depression in developing nations

#### **Mental Health Innovation Network**

https://www.mhinnovation.net/

For: a database of effective mental health interventions from around the world

#### **World Health Organization**

Mental Health Gap Action Programme (mhGAP) https://www.who.int/mental\_health/maternal-child/maternal\_mental\_ health/en/

For: more on the WHO's scaling of maternal mental health services

#### REFERENCES

- Scorza, P. and Monk, C. (2019) Anticipating the Stork: Stress and Trauma During Pregnancy and the Importance of Prenatal Parenting, Zero to Three Journal, May 2019: 5-19.
- 2 Zhang, S. et al. (2018) Effect of Caregiver's Mental Health on Early Childhood Development across Different Rural Communities in China, Int. J. Environ. Res. Public Health, 15(11): 2341. Available at: <u>https://doi.org/10.3390/ ijerph15112341</u>
- 3 Harvard Center on the Developing Child: Serve and Return. Available at:\_ https://developingchild.harvard.edu/science/key-concepts/serve-and-return/ (accessed June 2019).
- 4 Leijdesdorff S et al. (2017) Prevalence of psychopathology in children of parents with mental illness and/or addiction: an up to date narrative review. Curr Opin Psychiatry, 30(4):312–317. Available at: <u>https://www.ncbi.nlm.nih. gov/pubmed/28441171</u>
- 5 World Health Organization: Maternal mental health. Available at: https:// www.who.int/mental\_health/maternal-child/maternal\_mental\_health/en/ (accessed May 2019).
- 6 Mental Health Innovation Network: Thinking Healthy Programme. Available at: <u>https://www.mhinnovation.net/innovations/thinking-healthy-programme</u> (accessed June 2019).
- 7 TReeves, R. (January 2019) 'The Power of Love: Why maternal depression is an economic mobility issue', The Brookings Institute. Available at: <u>https://www.brookings.edu/research/the-power-of-love-why-maternal-depression-is-an-economic-mobility-issue/</u> (accessed June 2019).

- 8 Fraiberg, S. et al. (2003). Ghosts in the nursery: A psychoanalytic approach to the problems of impaired infant-mother relationships. In J. Raphael-Leff (Ed.), Parent-Infant Psychodynamics: Wild things, mirrors and ghosts: 87-117.
- 9 Mental Health Innovation Network: StrongMinds. Available at: <u>https://www.mhinnovation.net/innovations/strongminds</u> (accessed August 2019).
- 10 NHS to introduce mental health checks for new fathers, Positive News (December 2018). Available at: <u>https://www.positive.news/uk/nhs-to-introduce-mental-health-checks-for-new-fathers/</u> (Accessed June 2019).
- 11 Kumar, S. V., Oliffe, J. L., Kelly, M. T. (2018). Promoting postpartum mental health in fathers: Recommendations for nurse practitioners. American Journal of Men's Health, 12(2), 221–228. Available at: <u>https://www.ncbi.nlm.</u> <u>nih.gov/pubmed/29183251</u>
- 12 Mental Health Innovation Network: Thinking Healthy Programme. Available at: <u>https://www.mhinnovation.net/innovations/thinking-healthy-programme</u> (accessed June 2019).
- 13 Mental Health Innovation Network: Thinking Healthy Programme. Available at: <u>https://www.mhinnovation.net/innovations/thinking-healthy-programme</u> (accessed June 2019).
- 14 Zafar, S. (2018) 'Using technology to train health workers to treat maternal depression at scale: a new model from Pakistan,' Early Childhood Matters 2018. Available at: <u>https://earlychildhoodmatters.online/issues/early-childhood-matters-2018/</u>