



Healthwatch England
Maternal Mental Health Matters Survey
Staffordshire Findings

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Background

At the end of 2022 **Healthwatch England** carried out a national survey called 'Maternal Mental Health Matters'. Healthwatch Staffordshire used Social Media assets supplied by Healthwatch England (see Appendix A) to promote the national survey on our Facebook page in November and December 2022.

The National survey (see Appendix B) received 2693 responses with 51 of these from Staffordshire. Healthwatch England were later able to share the Staffordshire data with us and this report summarises the local results.

National Healthwatch Survey & Research

The **Healthwatch England** National Survey ran online on their website from 31 October 2022 to 12 December 2022 and was self-selecting. This means that the demographics of the respondents may not reflect the demographics of the country (or county) as a whole. Healthwatch England also conducted Freedom of Information requests with Integrated Care Boards, NHS Trusts and GP Surgeries.

A report was published in March 2023¹ with the following findings:

- Care during and after labour in hospital is having an impact on maternal mental health.
- 6-8 week postnatal consultations are not working well for everyone
- Many new mothers and birthing parents are struggling to access the support they need for their mental health.
- Delays in accessing mental health support can have a devastating impact.
- Better communication is needed for people during and after the perinatal period.
- More training and support are needed for GPs to have quality conversations about mental health.

Further work was also undertaken with four local Healthwatch interviewing new mothers about their experiences and some of their stories are reported in the Healthwatch England blog².

This work follows on from previous Healthwatch England work³ in 2019 which "directly contributed to the introduction of mental health checks in the postnatal consultation for mothers".

What Is Perinatal Mental Health – Why is it Important ?

The NHS England website⁴ has the following quote which stresses the importance of good maternal mental health on the whole family.

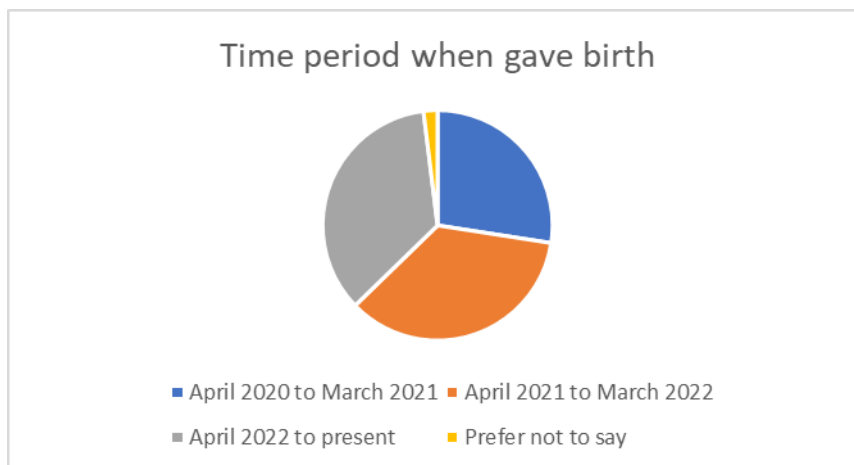
“Perinatal mental health (PMH) problems are those which occur during pregnancy or in the first year following the birth of a child. Perinatal mental illness affects up to 27% of new and expectant mums and covers a wide range of conditions.

If left untreated, mental health issues can have significant and long-lasting effects on the woman, the child, and the wider family. Specialist PMH services provide care and treatment for women with complex mental health needs and support the developing relationship between parent and baby. They also offer women with mental health needs advice for planning a pregnancy.”

Staffordshire Survey Results

While we were pleased with the number of responses from Staffordshire, the sample size is still relatively small. There is also no information about which specific areas/services within Staffordshire are being discussed. The findings therefore reflect the experiences of this particular group of parents and may not reflect practices/services all across the County.

Demographics – Overview



All respondents had given birth since April 2020. 76% of these were first time mothers. One was aged 18 to 24, the remaining 50 were all aged between 25 and 49. 94% were straight and the remaining 6% non-straight. 100% of those surveyed gave their ethnicity as White with 92% as White British. There were no carers in the sample. 2% had a disability, 8% had a long-term condition and 4% were neurodivergent.

Mental Health Difficulties – Previous History

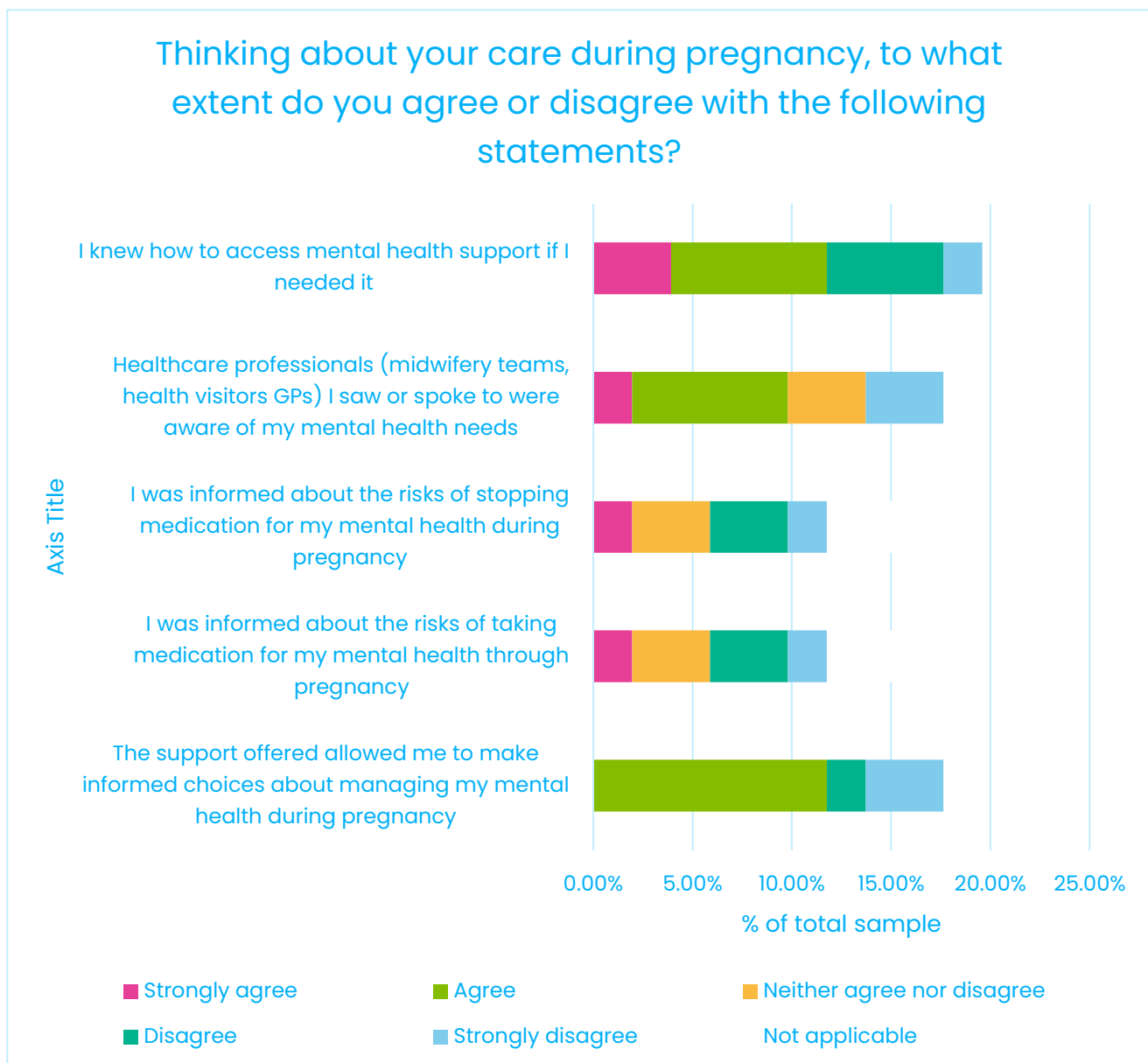
Prior to becoming pregnant, 10 of those questioned had a diagnosed mental health condition and 3 had an undiagnosed condition.

During or after pregnancy 16 (31%) experienced mental health difficulties for the first time, 11 (22%) said they had a relapse of a previous problem and 6 (12%) experienced additional mental health difficulties.

This leaves only 18 out of the sample of 51 who were not affected by mental health issues after becoming pregnant.

Care During Pregnancy

10 of those with an existing mental health condition replied to the questions about care during pregnancy.



People knew where to go for help if they needed it. Health professionals were aware of their condition and the support they received allowed them to make informed choices.

There is less clarity around mental health medication and the implications of starting or stopping this while pregnant.

Staffordshire respondents said:

"It (mental health) was never mentioned at all except for the midwife who booked me in and took my medical history. Never brought up again, no support whatsoever for current mental health issues and anxiety that developed during pregnancy."

"I had 4 previous miscarriages it took until I was 28 weeks pregnant to receive any mental health support."

The main complaint with community antenatal care was a lack of consistency/continuity with midwives.

"Did not have a consistent midwife throughout, saw a different one every time which resulted in massively different levels of care and guidance."

"I received good care throughout pregnancy, but the midwives would change in each appointment. In 2 visits I agreed to be examined by a student and they couldn't find my son's heartbeat. It was very stressful, but the supervisor stepped in, and they found it easily."

"I was classed as a high-risk pregnancy which I think contributed to my antenatal mental health."

"Whilst pregnant and following my birth I found the care from community midwives to lack empathy, they did not provide individualised care. My appointments did not cover what was expected - we did not discuss a birth plan, vitamin K or placenta delivery options. I had to read all this in my own time on the Internet, every time I asked a question or expressed anxiety about birth it was brushed off and I was told we will discuss it at the next appointment, and we never did. I had multiple different midwives so there was no continuity of care"

In some cases, hospital care during pregnancy led to feelings of isolation, shame and not being heard.

"My daughter was born a week into the first lockdown. There were complications and I was told I had to have a C-Section alone, I attended every check-up for 2 weeks alone, sat waiting for the C-section alone."

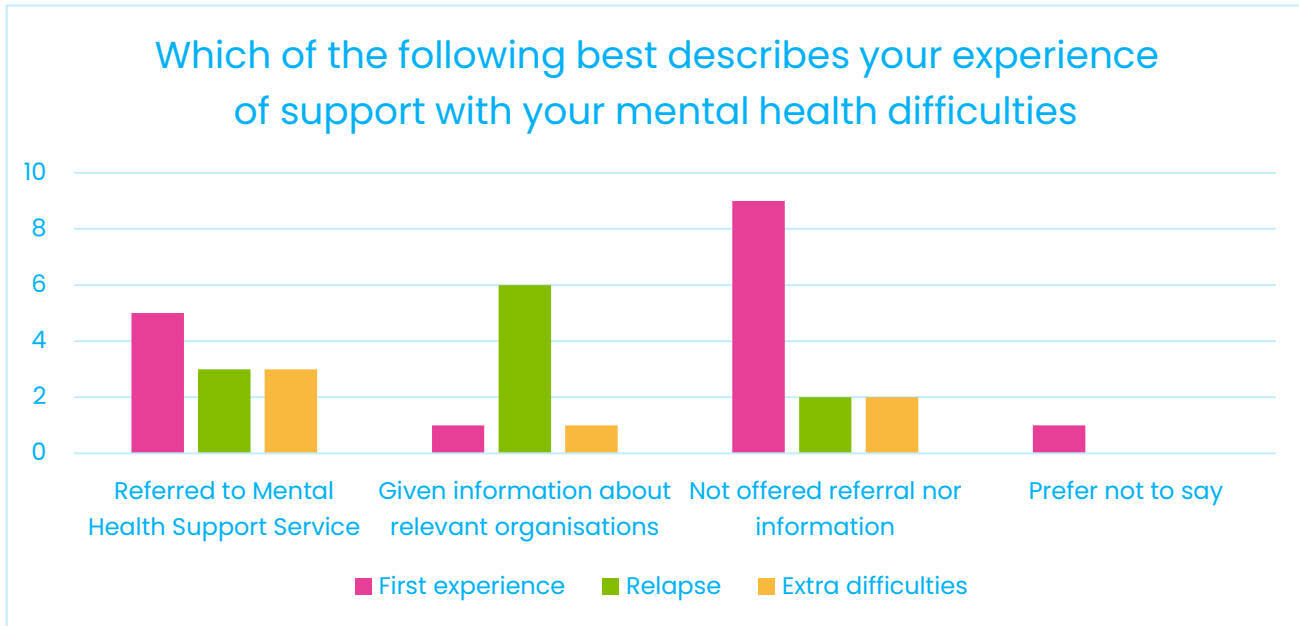
"Consultants at the hospital were dreadful, shamed me for having a high BMI the whole way through my pregnancy, did not listen to what I wanted, and tried to deter me from having a C-section despite having been in the hospital for three

days for an induction which failed whilst pregnant with a very large baby they wanted to start again on day four."

"I developed pre-eclampsia and was hospitalised a few times and felt I wasn't supported or listened to."

Support for Mental Health Problems

The following chart shows the experience of support for those with mental health problems during or after pregnancy (33/51).



This graph is broken down by whether it was their first episode, a relapse or an additional difficulty.

First time mothers make up the majority of those needing mental health support (16/33 or 48%) and most of them did not receive help (9/16 or 56%) – higher than the national figure at 44%.

Referrals

Of thirty-three respondents who experienced mental health difficulties only eleven mothers (a third) said they were referred to mental health services. The table below shows what services each participant was referred to – several were referred to more than one service.

In Staffordshire, the most used service was psychological (talking) therapies, followed by specialised maternity mental health services. Two people used the mother and baby unit.

The following services mentioned in the national survey received no answers for Staffordshire – whether the last 2 services are available in Staffordshire is not known.

- Adult mental health services in the community or as an in-patient

- Birth trauma service
- Maternity bereavement

Support Service	A	B	C	D	E	F	G	H	I	J	K	Total
Mother & baby unit								X		X		2
Specialised maternity Mental Health Service	X		X	X	X		X					5
Psychological therapies (IAPT)	X	X		X	X	X			X	X	X	8
Local Peer Support Group	X											1
Voluntary/third sector					X							1
Medication										X		1
Episode #	First	First	Extra	First	First	First	Extra	Extra	Relapse	Relapse	Relapse	

"All mental health support was received by IAPT services."

"Had 6 telephone sessions for my anxiety but couldn't talk freely as family members were present."

"Lacked support after childbirth. I feel I was supported very little by the NHS, all my support came from peers (albeit via WhatsApp and Zoom)"

"My midwife did not know about the perinatal mental health team."

The table on the next page considers the waiting times for referrals, whether symptoms stayed the same, got better or got worse while waiting and what the symptoms experienced were. Just over half of those referred were seen within 3 weeks. One person was told to self-refer and the referral was then closed.

The waiting times are slightly lower than the national figures where 58% waited over 2 weeks and 19% waited over 6 weeks.

The main problems people suffered while waiting to be seen were anxiety, unwanted or intrusive thoughts, feeling unable to leave the house and behaving unpredictably – not ideal when looking after a new baby as one Mum explains:

"I had to ask for the mental health assessment referral to be expedited as the initial appointment was over a month after the referral was made. I didn't feel like my mental health was in a position to wait that long while caring for a very small baby."

	A	B	C	D	E	F	G	H	I	J	K	Total
Referral Waiting time	5-6w	<1w	8w	2-3w	2-3w	<1w	Self	Don't recall	1-2w	1-2w	Don't recall	
Symptoms while waiting	Same	Same	Same	Better	Worse	Same	Better	Worse	Worse	Same	Worse	
Anxiety	X	X	X	X	X	X		X	X	X	X	10
Unwanted/intrusive thoughts		X	X	X			X	X	X	X	X	8
Anger and Rage		X			X		X				X	4
Felt unable to leave house	X	X			X			X	X		X	6
Behaviour was unpredictable	X	X		X	X						X	5
Suicidal thoughts			X				X	X				3
Unable to bond with child				X	X							2
Relationships broke down	X		X									2
Income reduced					X							1
Struggled to care for others		X			X							2

We had very positive comments about two sources of support which we would like to mention:

Mothers Mind (Staffordshire)

"I found a charity that's local on the NHS website - Mother's Mind Staffordshire -and they have been a huge help to me over the last 14 months."

Mother's Mind Facebook page⁵ says *"We are a maternal mental health peer support group in Stoke on Trent. Accessible to all new mothers."*

CONI (Care of Next Infant) programme from the Lullaby Trust

For more information on this programme please see overleaf or Appendix D.

"I have been part of the CONI programme and have received great support from the CONI health visitor. The on-going support has made a big difference to me and my mental health during the first 2 months of my child's life"

The CONI programme is aimed at parents who have previously experienced the loss of a baby. The Lullaby Trust website⁶ says:

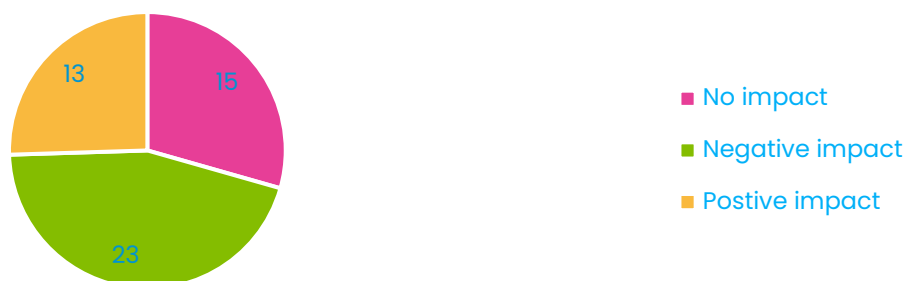
“Parents who have experienced a sudden and unexpected death of a baby often feel anxious when they have another baby. Working with local public healthcare providers we facilitate a service for bereaved parents.

CONI is available through health visitors, midwives, paediatricians and GPs, but unfortunately CONI is not available everywhere.”

Care During Labour and Childbirth

Unfortunately, 45% said that the care and support received during labour and childbirth had a negative impact on their mental health. This compares with 42% nationally.

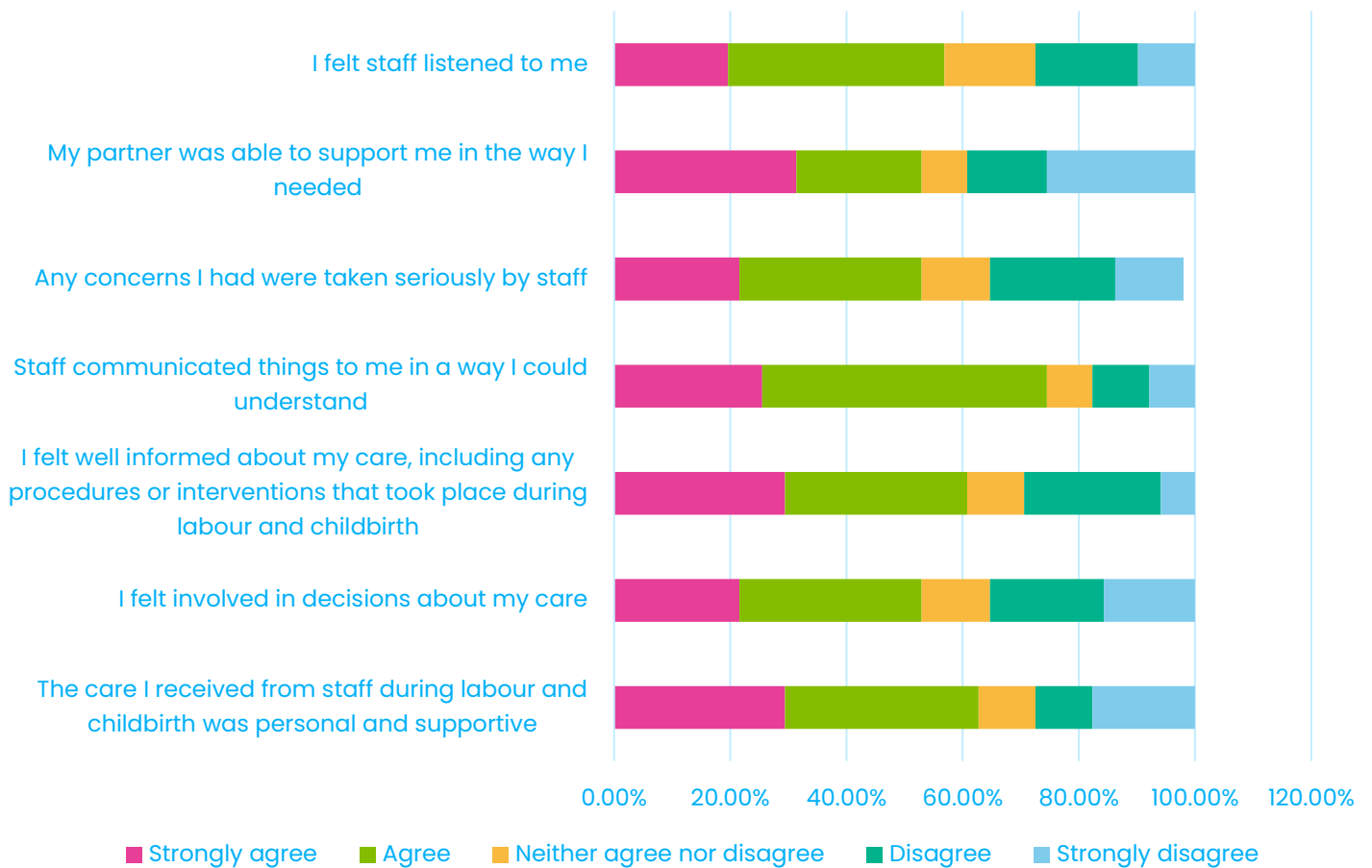
Thinking about the care and support you received during labour and childbirth, what impact did it have on your mental health?



Most people felt that staff explained things clearly, the majority received care that was personal and supportive, felt listened to and well informed about their care.

There were, however, significant numbers who did not feel involved in decisions about their care, did not feel concerns were taken seriously and whose partners could not support them in the way they needed.

Thinking about your care during labour and childbirth, to what extent do you agree with the following statements?



There were very mixed experiences of hospital care and some problems were exacerbated by Covid restrictions. The following quotes are **about labour and delivery**.

"My husband was not allowed to be with me when I was induced due to Covid."

"The fact my husband had to leave whilst I was in early labour was not fun."

"I was ignored and not listened to when my water broke, and I laboured on my own at night in an induction ward as the nurses wouldn't listen to me saying I was in pain and things were ramping up. My husband nearly missed the birth as . . . I was fully dilated and they had not believed me."

"Not feeling listened to when in labour initially and not being believed about how much pain I was in affected my labour journey. Midwives initially were not fully supportive and felt pushed out of the hospital. Baby was back-to-back and breech and I was sent home in labour and even when contractions were coming quicker and more painful, they were reluctant to let me back in to the hospital which resulted in an emergency C-section."

"Requested a review of my labour to help my mental health and still waiting."

"Initially, when I called the hospital to say I was in labour, I was completely dismissed. However, on arrival at the hospital everyone else I encountered was amazing."

"The care I received on the ward and in labour was far superior and I am so grateful for all of the midwives' support and care."

"My partner got sent home very soon after the birth due to covid restrictions. I feel like this had an impact on my birth experience after a traumatic delivery."

The next quotes cover care between giving birth and being discharged from the hospital. These talk about over-stretched staff, a quick discharge after C-section and feeling alone and neglected.

"My daughter was whisked away from me after birth with no explanation as to why or when she would be coming back to me. We spent 6 days in hospital alone. Nurses were too busy to help. No breastfeeding help. I even had to carry/pull my own bag moving wards after major surgery."

"Support during labour and childbirth was great, it was afterwards that I felt was a bit lacking. The hospital was concerned with getting me home as soon as possible, but I found 24 hours post C-section to be sent home was a bit soon for me to be emotionally ready for life with a new baby."

"It was clear that the midwives on the labour ward were extremely stretched, after our birth we were left alone for a number of hours whilst they dealt with emergencies (this was before weighing the baby, a shower, moving to the ward). I have no complaints about the care I received but I think a lot is being asked of too few midwives, and if I had needed more support after the birth then I could have felt neglected."

"The midwives did as much as they could, but they were understaffed, and I felt so alone once I was on the ward and out of the maternity suites."

"There was no mental health support in hospital, there was barely any physical support especially once I had given birth, I felt very neglected and poorly treated. There weren't enough staff whilst I stayed in hospital any of the times I was there,"

"I felt left and abandoned after I have birth. No one checked on me."

"My partner had to leave a few hours after our baby was born and I was left alone for two days."

"The fact he also could only visit for three hours a day once I'd given birth was extremely hard and I feel had a negative impact on my mental health and well-being. I was very poorly and needed his help, but he couldn't be there."

"Was in the hospital on my own for 2 days - partner couldn't spend those first hours with his daughter."

One person said that her care was not tailored to reflect her specific circumstances and that this was quite insensitive.

"My baby was premature and was in the neonatal unit. Some of the care I received on the postnatal ward was not sensitive to this for example making me watch a video about taking your baby home when mine wasn't going home for a long time."

General Comments

The following are general quotes about the maternity experience:

"I made a formal complaint to the hospital. Disappointed with service and attitudes"

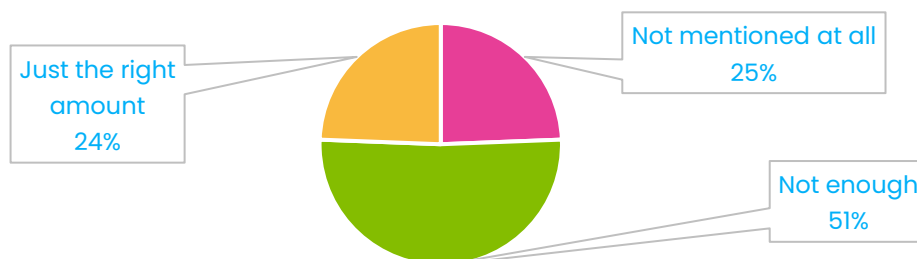
Utterly horrendous and unnecessarily cruel. I felt like a pig in a piggery - a number to be pushed through the system and a burden.

Postnatal Check-ups

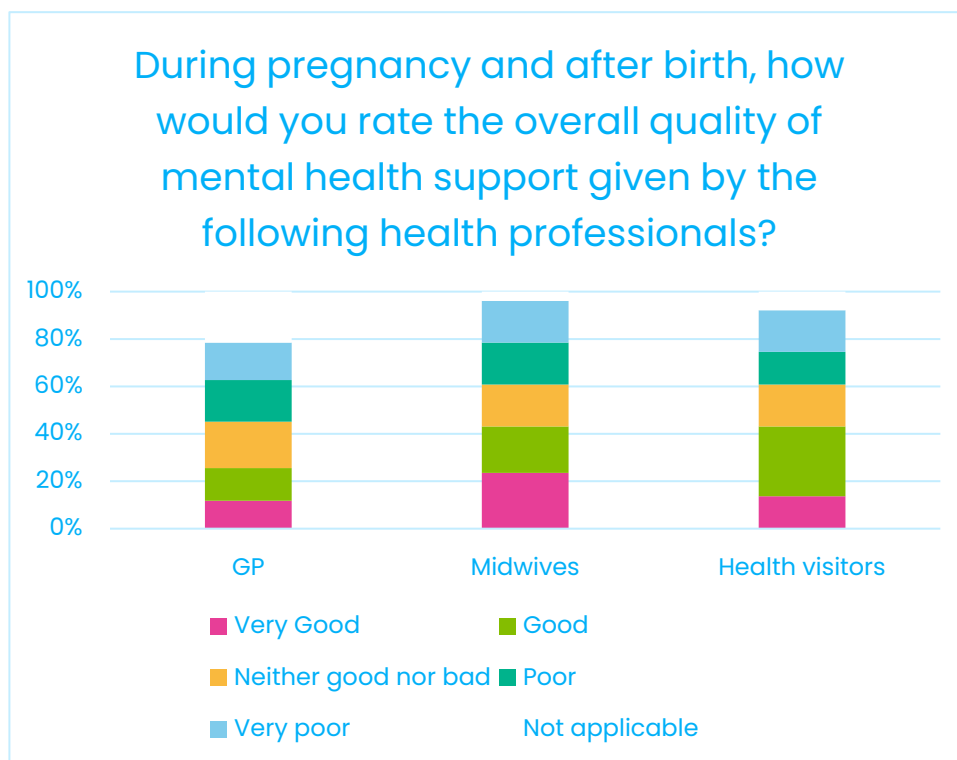
There is a requirement for GPs to deliver a six-week postnatal consultation. 80% of those surveyed had a postnatal check-up but 20% did not – this is slightly worse than the national data (where 16% did not receive one).

The majority of these were done face to face (30) with the rest being conducted on the telephone (11). Just over half felt that not enough time was spent on mental health and wellbeing. Only 24% felt the right amount of time was spent which compares with 22% nationally.

At the postnatal check-up, thinking about the time your GP spent talking to you about your mental health and wellbeing, did you feel it was



About 40% of midwives and health visitors provided mental health support that we rated Good or Very Good, while GPs only achieved about 25%. The ratings for Poor and Very Poor are similar across the different professions.



The following comments were received about GPs:

"... when I went to the GP to say my Labia stitches really hurt, I got told it just wouldn't be the same again. The doctor at 6 weeks only checked the baby and didn't even mention anything about me."

"My GP did not take my health anxiety seriously at all after birth and I ended up paying privately for health checks and then moving GP surgery."

"8-week check-up was pointless. I told the condescending doctor if my anxiety and back issues and he told me just to do yoga."

"My husband should have had support too. He is still struggling with postpartum depression. It shouldn't only be help and support for women. Saying that there was no check-up for myself either."

"... didn't have the post-partum check-up."

"GP very poor at understanding issues around breastfeeding that were impacting mental health and actually made anxiety worse."

The following quotes relate to Health Visitors:

"Health visitor only person who supported mental health."

"I had no in-person Health Visitor checks, no pre-birth course nor offered any alternative."

"No help from Health Visitor after we got home. I called weekly to complain until they agreed to see us."

"Poor long-term support from Staffordshire Health Visitors"

"My daughter only saw a Health Visitor once when she was 2 and a half."

Anything Else ?

When asked "Is there anything else about your maternity experience that you want to tell us about?" we also received a wide range of answers that related to feeding their baby and support with that. This was not specifically mentioned in the survey, but we felt that these quotes deserved a section of their own.

Feeding

These relate that one of the initial and most stressful experiences for the mother can be difficulties with feeding the baby. It may not be easy for everyone to establish breastfeeding, and this can be very distressing for the mother. We also heard there was a lack of support around starting formula if breastfeeding is not possible. Problems may also arise with feeding later.

These stories emphasize how important it is to offer ongoing, consistent and non-judgemental support with feeding to the mother, however, she chooses to feed her baby. It is important to balance the benefits of breastfeeding for the baby with the wellbeing and mental health of the mother.

"I had very, very little support and relied on a midwifery student who came to talk to me and offer emotional support. I strongly believe that being alone for the first two nights after having my baby, being unable to put her down and unable to feed successfully and unable to sleep, had a massive detrimental impact on my mental health."

"My baby struggled with feeding straight after birth, and I was given no support in the ward by the midwives who expected me to initiate feeding independently for the first time, when I asked repeatedly for someone to support me."

"Most important of all, I was not offered or informed of breastfeeding support."

"Often mental health questions were closed, rushed or at the end of the session. One Health Visitor asked me as she was leaving my house after I had spent the whole time crying whilst a feeding plan was thrust upon me."

"After birth I was readmitted due to high blood pressure again husband was not allowed to visit. Then at the 5-day check my baby had lost weight so I was sent to the CAU* with no explanation this was the most traumatising the staff were horrible and made me feel like I hadn't been feeding my baby when in fact it was due to my milk coming in late due to emergency C-section."

*We believe CAU is Children's Assessment Unit

"I appreciate breast is best but, when unable to establish breastfeeding due to circumstances, more needs to be done to support and reassure with bottle feeding and formula. It had a huge negative impact for me."

"After having my baby, the support for breast feeding was poor, I had anxiety about feeding my baby and the midwives lacked empathy and told me it was important for the baby for me to continue, they did not consider me in this decision. They did say I did not have to breast feed but the way it was worded made me feel like I had failed, I believe there needs to be more focus in the mother's needs and health as well as the baby's. The health visitor was great and helped me with the baby's latch and to get my confidence with nipple shields, but then in my next midwife appointment I was told I was doing things wrong, and I shouldn't be using shields, all the advice was contradicting adding to stress and anxiety."

"At 6 months my baby started to lose weight and I was not provided with support from health visitors, who told me to 'continue breastfeeding' even though no methods worked, and it was seriously impacting my mental health. I had a month of pure stress, pressure and anxiety but no one helped."

Undiagnosed Tongue-Tie

There were 2 responses where feeding difficulties had been caused by an undiagnosed tongue-tie. In both cases it was only after paying for private help that this was identified.

"My son was not gaining weight during this period, and I was under great stress because I couldn't feed my baby".

"I ended up paying privately to have the tongue tie resolved to help my mental health. "

Recommendations from Healthwatch England



5 main recommendations were put forward in the Healthwatch England Report¹:

1. Integrated Care Systems (ICSS) should monitor the delivery of six to eight-week postnatal consultations as part of their primary care commissioning responsibilities.

2. The Medical Licensing Assessment being introduced from 2024 should check understanding of the importance of postnatal mental health and the mental health element of the postnatal consultation.
3. The section of the GP contract on delivery of postnatal consultations should be updated to include mention of signposting to specialist and community mental health services and point to best practice guidance around carrying out open-ended discussions.
4. As part of its Maternity Transformation Programme, NHS England should consider what additional support and guidance it can provide for GPs to have quality conversations about mental health at the six to eight-week postnatal consultation.
5. Deliver the Long-Term Plan commitments on improving access to specialist community perinatal mental health services



Our Findings for Staffordshire

Our findings mirrored those of the National Report¹ by Healthwatch England

1. A high proportion of respondents suffered mental health problems while pregnant or afterwards. In our sample, first time mothers were most likely to need mental health support but least likely to be referred or signposted to it.
2. Continuity of care during pregnancy is important to mothers. They prefer to see the same midwife consistently, but this rarely happens.
3. Advice around starting or stopping mental health medication while pregnant could be improved/clarified.
4. Hospital care before, during and after labour influences maternal mental health. Not being heard/listened to by professionals causes distress. Several comments were made about services being understaffed.
5. There are some excellent local and national services available to support maternal mental health. These could be routinely promoted to mothers both during early pregnancy and on hospital discharge.
6. Becoming a parent can raise many insecurities and how to feed the baby is one area where there can be a lot of pressure but not enough guidance and support for all methods of feeding.
7. The 6–8 week postnatal check-ups are not always carried out. They do not always focus on the health of the parent (mental or otherwise) as much as that of the baby.
8. All health professionals, but especially GPs, could benefit from training and support around having sensitive and meaningful conversations around maternal mental health.

Recommendations

The following recommendations are based on the experiences of the 51 people who responded to the survey in Staffordshire, some of whom had very poor treatment.

We would like to think that most maternity services in the County are already providing services as suggested below but the responses show that not all services achieved this over the three years covered by the survey (2020, 2021, 2022).

- Sensitively identify pre-existing mental health conditions or any risk factors for mental ill health at an early stage of pregnancy and provide signposting and extra support if necessary.
- Give clear and timely advice about how related medications may affect pregnancy, so that parents can make informed choices.
- Right at the start of the pregnancy provide women with information on common mental health issues that may arise during and after pregnancy and where to go for mental health help. This should cover local NHS services but also related peer support groups and specialised National services. Appendix C provides some signposting resources which may be helpful.
- Raise awareness among professionals of how much poor hospital care and problems with feeding can affect the mental wellbeing of mothers going forward.
- Make the mother's wellbeing and health as important as that of the baby.

References

1. Left unchecked – why maternal mental health matters, Healthwatch England, March 2023 <https://www.healthwatch.co.uk/left-unchecked-why-maternal-mental-health-matters>
2. Stories from new mothers: accessing maternal mental health services – Healthwatch England blog 19 June 2023 <https://www.healthwatch.co.uk/blog/2023-06-19/stories-new-mothers-accessing-maternal-mental-health-services>
3. Mental Health and the Journey to Parenthood, Healthwatch England. September 2019 <https://www.healthwatch.co.uk/report/2019-09-09/mental-health-and-journey-parenthood>
4. Perinatal Mental Health – NHS England website <https://www.england.nhs.uk/mental-health/perinatal/>
5. Facebook page for Mothers Mind (Staffordshire) <https://www.facebook.com/MothersMind2021>
6. Care of Next Infant (CONI) – Lullaby Trust Website <https://www.lullabytrust.org.uk/bereavement-support/how-we-can-support-you/our-care-of-next-infant-scheme/>

Appendix A

Healthwatch England Social Media Assets

These images and supporting copy/content were provided by Healthwatch England. We used this on Healthwatch Staffordshire's Facebook Page to promote the National Survey. 8 posts were made during November and December 2022.

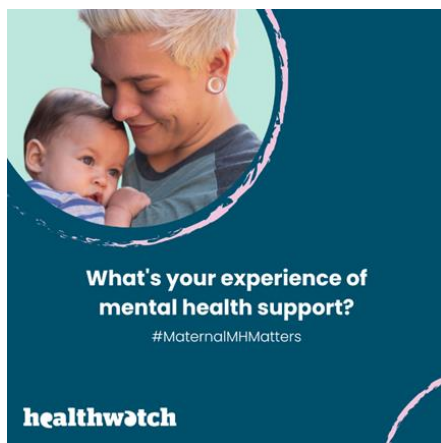
We tagged local organisations who work with

- a) mental health
- b) perinatal or postnatal support
- c) LGBTQIA+ groups

Contact details of these organisations can be found in Appendix C.

We also used the following hashtags in our posts:

#MaternalMHMatters #NewMum #PerinatalMentalHealth #PostNatalDepression #NewParent #BirthTrauma #ChildBirth #PND #BabyBlues #lgbtparents #ParentingIsHard



Appendix B

Healthwatch England – Maternal Mental Health Matters – Survey Questions

Share your experience and help improve maternal mental health support

Have you given birth since April 2020?

If the answer is yes, we want to hear about your experience of mental health support throughout your maternity journey. Please give feedback and help us improve mental health support for new parents. This will only take five minutes of your time.

We'll use your feedback to help the NHS identify improvements.

In this survey, we'll ask you:

- About your experience of mental health support throughout your maternity journey, from pregnancy to after birth. Please note that this survey covers sensitive topics, including questions about childbirth and mental health. You can answer "prefer not to say" to any of these questions.
- Optional information about you, including health conditions, ethnicity, sexuality, financial security and education. You can answer "prefer not to say" to any of these questions. This information helps us to understand how different groups experience health services to reduce inequalities.

We'll use survey responses to understand experiences and report to the NHS on what is working and how to improve care.

Q1. Please select the option which describes your most recent experience. Since April 2020,
I have given birth/I have had a stillbirth/None of the above

Q2. Please select the time period when you gave birth

April 2020 to March 2021/ April 2021 to March 2022/April 2022 to present/ Prefer not to say

Q3. Was this your first experience of giving birth?

Yes/No

Q4. What area do you live in?

Staffordshire

Q5. Did you have a mental health condition prior to becoming pregnant?

No / Yes, I had a diagnosed mental health condition / Yes, I had an undiagnosed mental health condition

Q6. Thinking about your care during pregnancy, to what extent do you agree or disagree with the following statements:

Options: Strongly agree / Agree / Neither agree nor disagree / Disagree / Strongly disagree / Not applicable

Q6.1. The support offered allowed me to make informed choices about managing my mental health during pregnancy

Q6.2. I was informed about the risks of taking medication for my mental health through pregnancy

Q6.3. I was informed about the risks of stopping medication for my mental health during pregnancy

Q6.4 Healthcare professionals (midwifery teams, health visitors, GPs) I saw or spoke to were aware of my mental health needs.

Q6.5. I knew how to access mental health support if I needed it

Q7. Which of the following best describes your experience whilst you were pregnant and after birth?

I experienced mental health difficulties for the first time

I experienced mental health difficulties in addition to my current mental health problem(s)

I experienced an episode of a mental health problem that I had previously recovered from

I did not experience any mental health difficulties

Prefer not to say

Q8. Which of the following best describes your experience of support with your mental health difficulties?

Prefer not to say

I wasn't offered a referral or any information about organisations

I was given information about organisations to contact for more mental health support

I was referred to a mental health support service (e.g. counselling, local peer group support, specialised perinatal mental health services)

Q9. Which service were you referred to for support with your mental health? (Tick all that apply)

Yes/No

Q9.1. Mother and Baby Unit

Q9.2. Specialised maternal mental health service (such as specialised maternal mental health therapist)

Q9.3. Psychological therapies service (talking therapies, cognitive behavioural therapy, counselling, other therapies and guided self-help)

Q9.4. Adult mental health services (including community and in-patient services)

Q9.5. Birth trauma service

Q9.6. Maternity bereavement service

Q9.7. Local peer group support

Q9.8. Voluntary or third sector support organisation

Q9.9. Other (please specify):

Q10. How long did you wait to get an appointment with a mental health support service after being referred?

- The same day
- Within a week
- 1-2 weeks
- 2-3 weeks
- 3-4 weeks
- 4-5 weeks
- 5-6 weeks
- I can't recall
- Over 6 weeks (please specify how long)

Q11. Which of the following statements best describes your experience while waiting for treatment for your mental health?

My symptoms improved / My symptoms remained the same / My symptoms got worse

Q12. Which of the following symptoms or consequences did you experience while waiting for treatment for your mental health? (Tick all that apply)

- Q12.1. I suffered with anxiety
- Q12.2. I had unwanted and intrusive thoughts
- Q12.3. I suffered with anger and rage
- Q12.4. I felt unable to leave the house
- Q12.5. My behaviour was unpredictable
- Q12.6. I had suicidal thoughts
- Q12.7. I was unable to bond with my child
- Q12.8. My relationships broke down
- Q12.9. My income reduced
- Q12.10. I struggled to care for others
- Q12.11. I lost my job
- Q12.12. None of the above
- Q12.13. Other (please specify):

Q13 Thinking about your care during labour and childbirth, to what extent do you agree with the following statements?

- Options: Strongly agree / Agree / Neither agree nor disagree / Disagree / Strongly disagree
- Q13.1. The care I received from staff during labour and childbirth was personal and supportive
 - Q13.2. I felt involved in decisions about my care
 - Q13.3. I felt well informed about my care, including any procedures or interventions that took place during labour and childbirth
 - Q13.4. Staff communicated things to me in a way I could understand
 - Q13.5. Any concerns I had were taken seriously by staff
 - Q13.6. My partner was able to support me in the way I needed
 - Q13.7. I felt staff listened to me

Q14. Thinking about the care and support you received during labour and childbirth, what impact did it have on your mental health?

There was no impact / It had a negative impact / It had a positive impact / Prefer not to say

Q15. During pregnancy and after birth, how would you rate the overall quality of mental health support given by the following health professionals

Options: Very good / Good / Neither good nor bad / Poor / Very poor / Not applicable/ Prefer not to say or can't recall

Q15.1. GP

Q15.2. Midwives

Q15.3. Health visitors

Q16. Did you have a postnatal check-up? (an appointment with your GP around 6-8 weeks after the birth, to make sure you feel well and are recovering properly)

Yes / No / Prefer not to say / I can't recall

Q17. At the postnatal check-up, thinking about the time your GP spent talking to you about your mental health and wellbeing, did you feel it was

Not mentioned at all / Not enough / Just the right amount / Prefer not to say or can't recall

Q18. How did your postnatal check-up with your GP take place?

Face-to-face / Over the phone / By video call

Q19. Is there anything else about your maternity experience that you want to tell us about?

Free format text

Q20. Please tell us your age

18-24 / 25-49

Q21. Please tell us your gender identity

Woman, Trans man, Nonbinary, Prefer Not to Say, Prefer to Self-Describe

Q22. Please tell us which sexual orientation you identify with

Asexual, Bisexual, Gay man, Heterosexual/straight, Lesbian/gay woman, Pansexual, Prefer not to say, Prefer to self-describe

Q23. Please select your ethnicity

White: British/English/Northern Irish/Scottish/Welsh / White: Any other

Q24 Which of the following statements apply to you ? (Tick all that apply)

Yes / No

Q24.1. I am a carer

Q24.2. I have a disability

Q24.3. I have a long-term condition

Q24.4. I am neurodivergent (autistic, ADHD/ADD, dyslexic, Tourette's, etc)

Q24.5. None of the above

Q24.6. Prefer not to say

Appendix C

Local Organisations

Mental Health in Staffordshire

<p>Staffordshire and Stoke-on-Trent Wellbeing Service</p> 	<p>0300 303 0923 staffsandstoketalkingtherapies.nhs.uk https://www.facebook.com/StaffordshireandStokeonTrentTalkingTherapies</p>	
<p>Burton and District Mind</p> 	<p>01283 566696 burtonmind.co.uk info@burtonmind.co.uk https://www.facebook.com/burtondistrictmind Based in Burton on Trent</p>	<p>Here to make sure anyone with a mental health problem has somewhere to turn for support</p>
<p>North Staffs Mind</p> 	<p>01782 262100 nsmind.org.uk info@nsmind.org.uk https://www.facebook.com/NorthStaffsMind Based in Hanley</p>	<p>We won't give up until everyone experiencing a mental health problem in North Staffordshire</p>
<p>Changes Health & Wellbeing</p> 	<p>01782 411433 changes.org.uk contact@changes.org.uk https://www.facebook.com/changes.northstaffs</p>	<p>A charity working for better mental health, recovery, wellness and social inclusion</p>
<p>Staffordshire Network for Mental Health</p> 	<p>snfmh.org gemma.giles@snfmh.org https://www.facebook.com/ssnmentalhealth Based in Lichfield</p>	
<p>Brighter Futures</p> 	<p>01782 406000 Brighter-futures.org.uk info@Brighter-futures.org.uk https://www.facebook.com/brighterfuturesNW Based in Hanley</p>	<p>Housing, Health, Hope</p>

Perinatal and Postnatal Support in Staffordshire

<p>MPFT Perinatal Mental Health</p> 	<p>Mpft.nhs.uk/services/mental-health-perinatal-community https://www.facebook.com/MPFTperinatal</p>	<p>Perinatal mental health services across South Staffordshire and Shropshire</p>
<p>Mothers Mind – Staffordshire.</p> 	<p>07442 101 871 Mothersmindstaffordshire.co.uk mothersmindmmh@outlook.com https://www.facebook.com/MothersMind2021 Based at the Bridge Centre, Birches Head.</p>	<p>A maternal mental health peer support group in Stoke on Trent. Accessible to all new mothers.</p>
<p>Staffordshire and Stoke-on-Trent Maternity and NeoNatal Voices Partnership</p> 	<p>sasot.mnvp@nhs.net https://www.facebook.com/SaSoTMNVP</p>	<p>Gather feedback and stories from local Mums, Dads and families about maternity and neonatal services.</p>
<p>Just Family CIC</p> 	<p>07505 275190 Justfamily-cic.org Justfamily.cic@gmail.com https://www.facebook.com/justfamilycic Based at the Bridge Centre Unit B3</p>	<p>Community led organisation to provide specialist TI Perinatal Parent Support</p>
<p>STILL (Support Together in Life After Loss)</p> 	<p>Royal Stoke Hospital Maternity Unit Forget-Me-Not Support Group (STILL)</p>	

LGBTQIA+ Support in Staffordshire

<p>Sage LGBT</p> 	<p>07764 457591 www.sage.lgbt hello@sage.lgbt https://www.facebook.com/SAGELGBTSTAFFS</p>	<p>Staffordshire-based charity supporting LGBT+ people, their families and friends</p>
<p>Trans-Staffordshire</p> 	<p>07470 485425 https://trans-staffordshire.org.uk info@trans-staffordshire.org.uk Facebook https://www.facebook.com/transstaffordshire</p>	<p>Trans – Staffordshire meets monthly in Stoke on Trent and Staffordshire</p>

Appendix D Information from the Lullaby Trust on their Care of Next Infant (CONI) Programme⁶

“CONI is currently available in many areas of England, Wales, Northern Ireland. Each area has a local co-ordinator who will discuss with parents the support available and arrange a plan of care with parents and professionals.

Where CONI is available, this programme is for parents who are expecting / given birth to a baby following the sudden unexpected death of their baby. Some areas are able to offer the programme to parents who are bereaved for other reasons, you will need to ask your midwife.

The programme is usually offered for 6 months after the baby is born but may be longer depending on the individual circumstances. For further details about CONI and the availability of CONI in your area, please email coni@lullabytrust.org.uk.”

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