

Maybe Baby:

Exploring perceptions of preconception care in Milton Keynes

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Preconception

The BLMK ICB Women’s health Lead, alongside a small project team developed the preconception care project to raise awareness of preconception care and improve access to preconception advice for all women and birthing people of reproductive age across BLMK. The project aimed to implement a range of interventions that would raise the profile of preconception care and advice, where to signpost or refer for support and provide education and training for healthcare professionals across BLMK so they are supported to have these conversations

We know that:

- Q Preconception advice is not routinely offered or available or considered when planning for pregnancy.
- Q When women/birthing people access antenatal care varies, with some accessing services quite late in pregnancy (post 10-12 weeks).

This has an impact on health outcomes for women/birthing people and babies, particularly those from Black Asian, diverse ethnic and deprived backgrounds.

Conception

Healthwatch Milton Keynes agreed to support reducing health inequalities in targeted cohorts, provide engagement and collaboration with community groups and people by:

- Supporting Communications from Tommy’s, Diabetes UK and other local/national bodies engaged by the ICB to provide specific advice and information.
- Using online and targeted engagement to promote preconception care and knowledge across our social media platforms
- Disseminating translated materials and communications (where provided by the ICB)
- Including pre-conception information/discussions in Healthwatch Milton Keynes’ monthly Women’s Health events
- Connecting with local community organisations in areas, raising awareness of the project, the need for and availability of pre-conception health and care
- Developing and running a survey with Maternity MK to explore current understanding and uptake of pre-pregnancy care
- Running a Well woman’s event aimed at communities more at risk of poor maternity outcomes
- Sharing information and advice on preconception care at local libraries and community larders
- Encouraging children and family centres, social prescribers and PCNs to become champions of pre-pregnancy planning

Gestation

A planned pregnancy is likely to be a healthier one, as unplanned pregnancies represent a missed opportunity to optimise pre-pregnancy health. With **45%** of pregnancies in the UK being unplanned, and much of the planning in the planned pregnancies not extending beyond a decision to 'start trying', the importance of preconception health needs to be amplified.

Healthwatch Milton Keynes were already running a series of women's health events. While these originally focused on menopause advice and support, they had evolved over time to include a more holistic set of topics covering all aspects of women's health. These included physical health and exercise, nutrition, financial, and spiritual health and wellbeing. There were fairly stable attendee numbers, with the makeup of the group varying depending on their interest in that month's topic.

One of the sessions held was dedicated to our D/deaf community. This group were able to utilise the British Sign Language interpreters to have a conversation with both Healthwatch Milton Keynes and the ICB Women's Health Lead. This session did not have a particular topic, but allowed our BSL using community to have conversations about the health issues that were important to them.

We were also able to arrange a *Maybe Baby* session to be facilitated by the Milton Keynes Consultant Obstetrician, charged with implementing the preconception clinics. It was disappointing that, despite the interest in previous topics across a wide range of age groups and ethnicities, we had no attendees at this session.

This seeming disinterest solidified what we had been thinking: preconception information needs to be packaged and promoted differently. People who are not planning a pregnancy are unlikely to take any notice of messaging on a topic that, in their minds, has no relevance to their lives. When we add to this the fact that around **one in three women become pregnant within a month of trying**, there is very little time for the conversation about pre-pregnancy health to be had, let alone for people to reap the benefits that the information could provide.

Survey highlights

- Q Only 20% of people who said they were **NOT** pregnant or trying to get pregnant were using any form of contraceptive (including 'withdrawal' or 'natural' methods)
- Q Almost 80% took dietary supplements whilst thinking about getting pregnant. Although this was largely only Folic Acid.
- Q 20% of people said they had received advice from a healthcare professional as part of their pregnancy planning. These respondents generally had pre-existing gynae issues/ mental health issues or had already experienced a pregnancy loss

Delivery

We built a webpage devoted to pre-pregnancy:

<https://www.healthwatchmiltonkeynes.co.uk/advice-and-information/2023-07-18/planning-getting-pregnant>

We took advantage of the Women's Health Lead, and the Consultant Obstetrician's passion for the project and they attended the Well Women event held at the MK Hindu Association.

We held an event for parents at a local primary school, had conversations with people at the Community Larders, and included preconception health in presentations to our local Patient Participation Groups (PPG).

We ran the Survey in conjunction with Maternity:MK and included preconception in our regular social media schedule.

We are working with the manager of the Milton Keynes recovery College to include a preconception health course on one of their upcoming timetables.

The survey we ran in conjunction with Maternity MK garnered **56** responses. We also spoke to a total of **134** women, and a further **85** staff and members of PPGs, Parish Councils, Community Larders, Children and Family Centres, and local voluntary groups.

Our social media posts about Preconception were consistently within our top **5** rated posts across all platforms. These posts reached over **4,500** people.

We continue to promote the preconception message and the ICB produced flyer is now a staple addition to our engagement materials.

Bedfordshire, Luton and Milton Keynes Health and Care Partnership

NHS Bedfordshire, Luton and Milton Keynes Integrated Care Board

Planning for Pregnancy

Planning your pregnancy can improve outcomes in childbirth, and beyond, for you and your baby.

Scan the QR code below to access the **Healthier Together** website which contains useful information, videos and links all in one place, to help you plan a healthy pregnancy.

bit.ly/planning4pregnancy

- **Tommy's Planning for Pregnancy Tool**
- **Planning for Pregnancy with Diabetes**
- **Support for Black and Asian women who are pregnant or planning a pregnancy**
- **Mental Health Support Services**
- **Planning for Pregnancy – clinic (PCC)**
- **Sexual Health**
- **Community Events**
- **Local Healthwatch**
- **Maternity Voices Partnership (MVP)**

BLMK Planning Pregnancy

Survey results

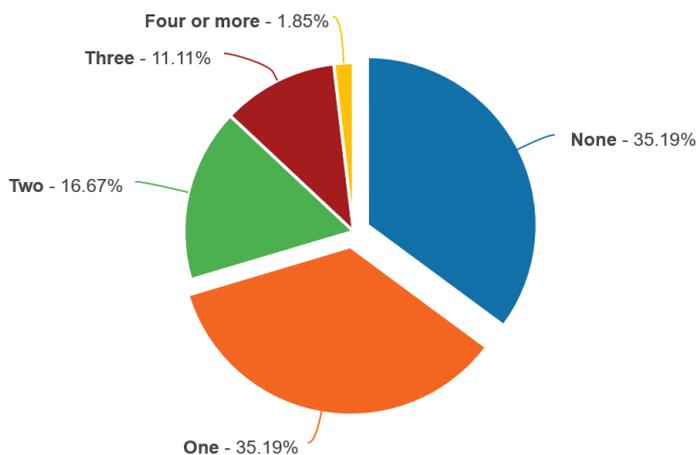
Q1. Are you currently pregnant or trying to get pregnant?

41% of respondents were currently pregnant, 23% were trying to get pregnant. The most interesting answers in relation to preconception health were that over 90% of people not currently pregnant, or trying to become pregnant, were NOT using any form of contraception. Only 8% of those not trying to conceive were using contraceptive, with more than half of this group reporting that they used natural means such as withdrawal or the 'rhythm method'.

Q2. How many previous pregnancies have you had?

This question also allowed people to add a comment around multiple birth, pregnancy loss, or IVF if they wished.

The 13 comments that were left suggest that the general understanding of pregnancy and childbirth being a process that women's bodies are, designed to successfully achieve naturally and somewhat easily, is an area where education needs to reflect the reality for a growing proportion of our population:



- Q *Pregnancy loss*
- Q *Had miscarriage with first pregnancy*
- Q *The two previous were naturally conceived with my ex-partner and were chemical pregnancies. This time I have reached 2 and this was an IVF baby with sperm donor as a solo woman*
- Q *1 previous pregnancy loss*
- Q *Loss at 18 weeks*
- Q *2 pregnancy losses. 1 successful*
- Q *Pregnancy loss, Last pregnancy was twins 1 loss 1 survival*
- Q *1 pregnancy loss*
- Q *1 live baby and 1 miscarriage*
- Q *Lost one pregnancy due to Ectopic*
- Q *One ended in a missed miscarriage*
- Q *One ended in a missed miscarriage*
- Q *IVF*
- Q *IVF twice as same sex couple*

Q3. How long before conceiving did you stop using contraception?



Of the 12% of people who responded with 'Other' one person said they fell pregnant on the day they didn't use contraception, one person saying they used natural family planning, one person said it was not relevant as they were in a same sex relationship, and the rest of the respondents gave time periods of between 3 and 5 months.

Q4. Have you received any advice from healthcare professionals prior to planning pregnancy?

Of the people who chose to answer this question, **73%** said they had **NOT** received any advice from health professionals prior to planning pregnancy, although one person said they had used the NHS website.

People who chose to tell us what advice they received said:

- Q Informed to wait 3-4 months after loss to try again
- Q Yes, my GP said to make sure I'm taking folic acid or a good pregnancy vitamin
- Q Perinatal mental health team - preconception appointment
- Q Yes for endometriosis and ovarian cysts
- Q Geneticist, as previous child was 12 weeks premature and has a genetic condition
- Q Yes I sought advice from the GP to get blood test done before so I was all good to go
- Q Sexual health advice
- Q GP referral regarding [family history] of DVT
- Q Due to epilepsy I'm under the care of an epilepsy nurse. I'd already made sure my medication was safe for pregnancy but immediately on my first pregnancy, my GP referred me to my epilepsy nurse and I've stayed under their care as despite our first pregnancy resulting in a complicated miscarriage, they knew I planned to try again so didn't want me having to go on any waiting lists

One person told us that they had not received advice because the GP was unaware of the policies around IVF. The consequence of not receiving timely or accurate advice can have catastrophic impacts on people’s access to treatment, on their mental health, and their financial health. This person said:

No. In fact my GP didn’t know when I first approached them, whether I could access IVF...

...They put me on the path anyway so that I could get advice from a consultant. That appointment got postponed several times and then 2.5 years later I rang [my local hospital] to inform them that I needed the consultation soon because otherwise I would be too old, from what I was aware, to access IVF treatment.

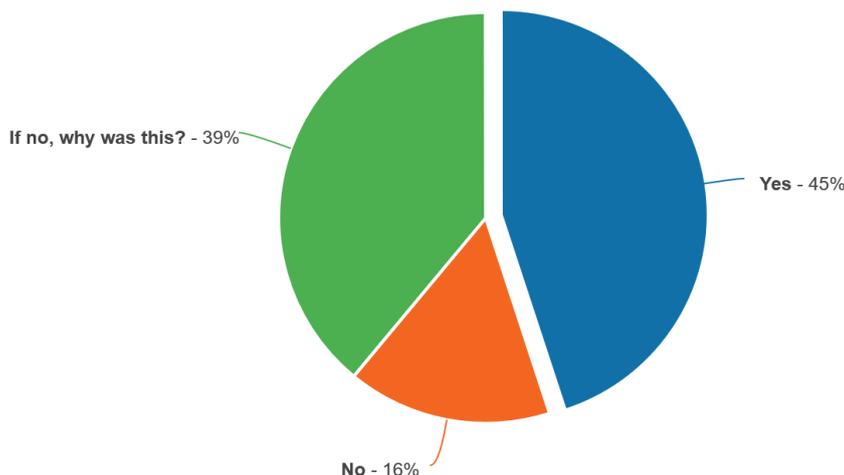
Unfortunately, I was advised that I could not access any part of IVF including any funding to help towards cost of medication as a single woman.

I have therefore self-funded one round of IVF which cost me overall nearly £14,000. I was fortunate to be able to borrow money from friends and family members. Without which I would not be pregnant.

Furthermore, if the information about what services I could access were made clearer to me from that start I could have taken proactive steps to:

- 🔍 research my options for different routes into parenthood
- 🔍 taken much earlier steps to pursue motherhood (change of relationship, saving money, more time to research different private options, preparing my body for pregnancy and improving egg health)

Q5. Was the information you received helpful and informative?



The **39%** who said they didn’t find advice helpful or informative were fairly evenly split between those who said they were not offered any, and those who said they had not asked for any.

One person who had said the advice they received was not helpful told us:

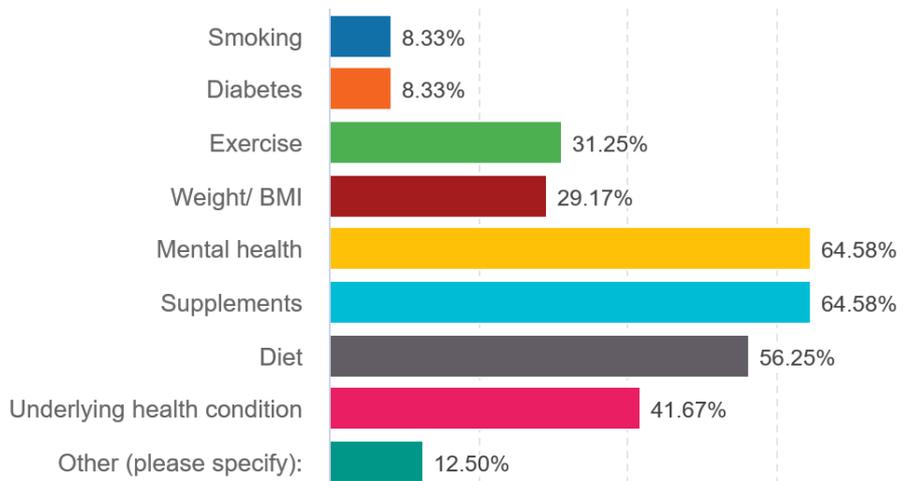
It was very late in the day as a 40 year old who first approached my GP at age 37, to have it confirmed that I am not eligible for NHS funding in any circumstance

Q6. Did you or would you seek advice or support about preparing for pregnancy?



Q7. If you were looking for advice or support with planning a pregnancy, what do you think would be useful to you?

This question gave people the option to select as many options as they wanted, and asked them to suggest anything else that they would find useful.

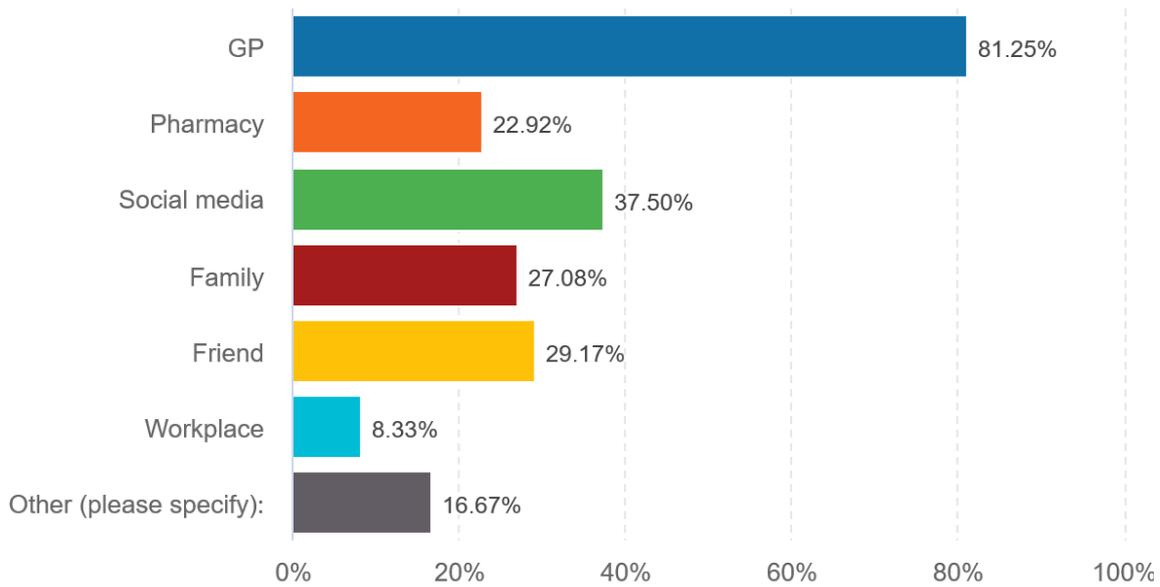


The suggestions given, in order of prevalence, were:

- Q Fertility/Infertility
- Q What natural ways to support fertility and pregnancy
- Q Endometriosis/ Polycystic Ovarian Syndrome (PCOS)

Q8. Where would you prefer to get this advice/ support from?

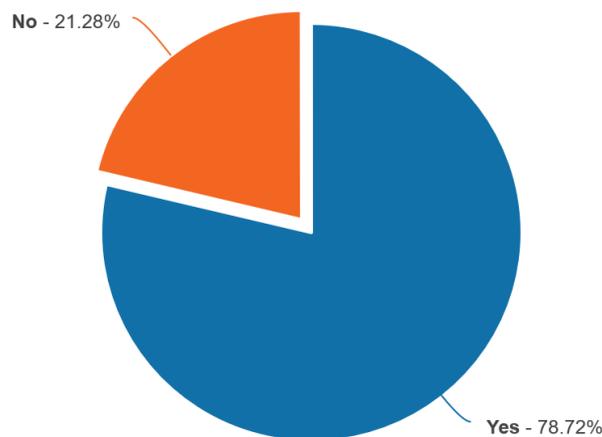
This question, again, asked people to select all of their preferred options and asked for further suggestions:



The suggestions given, in order of prevalence, were:

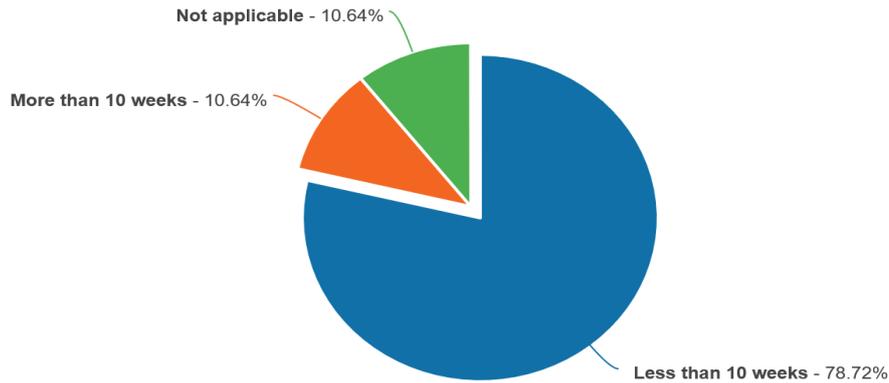
- Q Pregnancy websites/ online searches
- Q Condition specific experts (Diabetes/ Endometriosis/ PCOS – online or in person)
- Q Naturopath or holistic practitioner
- Q Books

Q9. Did you take any additional dietary supplements e.g. folic acid, whilst thinking about starting a family?



77% of the people who answered yes mentioned **folic acid**; and **41%** of the answers given mentioned **pregnancy specific multivitamins** or supplements. **12%** said they were taking **Vitamin D**. With **6%** taking specific enzymes or other supplements after being given advice based on non-NHS tests. The total exceeds 100% as some people mentioned more than one type of supplement.

Q10. At what stage of your pregnancy will you book/ did you book your first antenatal appointment with your midwife?



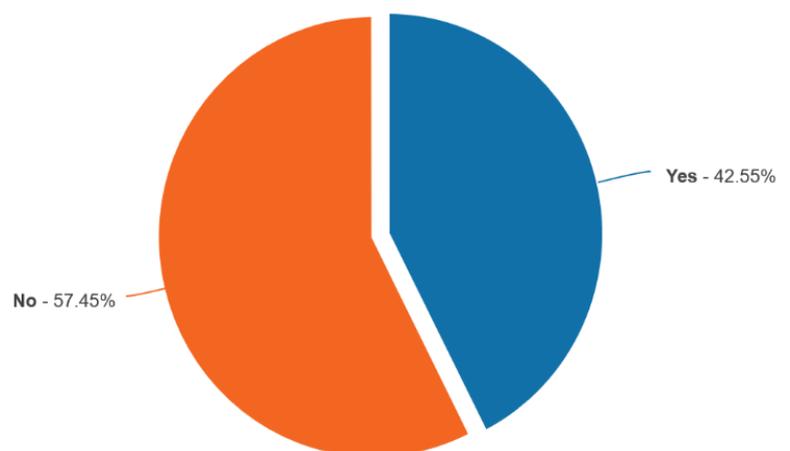
Only 3 respondents chose to tell us why they booked their appointment when they did:

- Q More than 10 weeks: Didn't need it before then
- Q More than 10 weeks: With IVF, its when we were handed over to the midwife
- Q Booked at 8 weeks, on advice found online

Q11. Do you have any medical/ long term conditions?

While almost half of respondents answered yes to this question, only 18 chose to disclose the type of medical or long-term condition they had. These responses are:

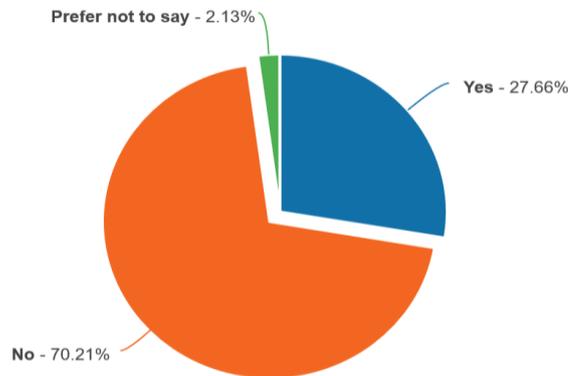
- Q Auto immune condition
- Q PCOS, Hypermobility syndrome
- Q Anxiety, depression, PTSD (traumatic birth)
- Q Hypothyroidism
- Q Asthma
- Q Migraines
- Q Dyspraxia, Autism ('ASD'), Chronic Fatigue, Post-Traumatic Stress (mental health)
- Q Overactive thyroid
- Q Mental health, Chronic pain
- Q PCOS
- Q Endometriosis, Ovarian cysts
- Q Heart and family illnesses
- Q Hyper mobility
- Q Epilepsy
- Q Iron deficiency, anaemia, social anxiety
- Q Generalised anxiety disorder, hypothyroidism, chronic fatigue syndrome
- Q Crohn's
- Q Low Thyroid function



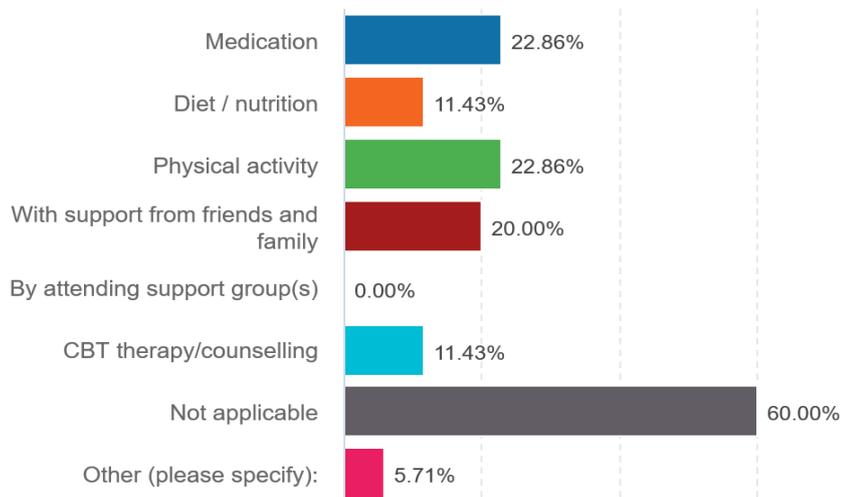
Q12. If you have diabetes, how do you manage your condition?

All respondents to this survey selected 'Not Applicable' in answer to this question.

Q13. Do you currently live with a mental health condition(s)?

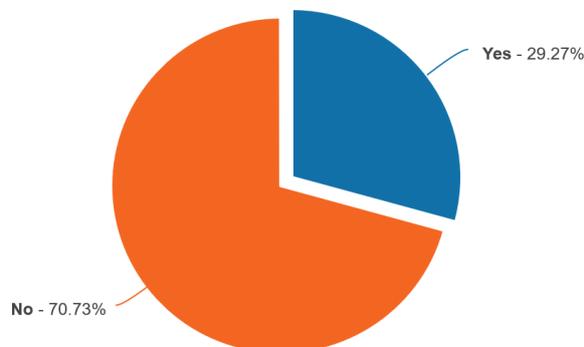


Q14. If yes, how do you manage your condition?



People who specified 'Other' said that they were taking medication but came off it for pregnancy. It was unclear whether these decisions were made with advice from the prescriber.

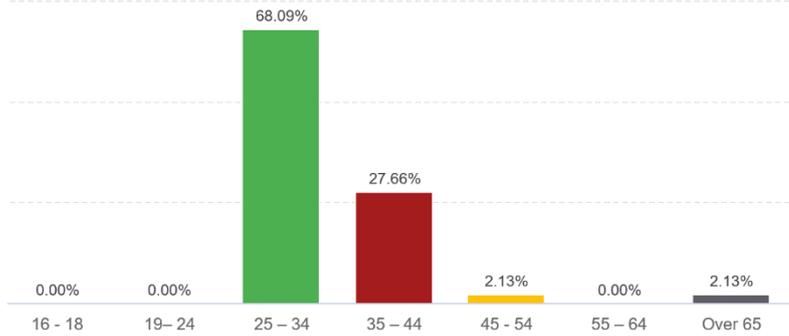
If you have a medical/ long term condition(s), have you spoken to anyone about how the condition(s), or treatment(s) for the condition, may affect your pregnancy?



The responses to this question highlight the need for people to understand the importance of preconception health. Education is required for those planning on having a family, as well as the practitioners who are providing treatment to people who, may not be planning a pregnancy but who could become pregnant.

Demographics

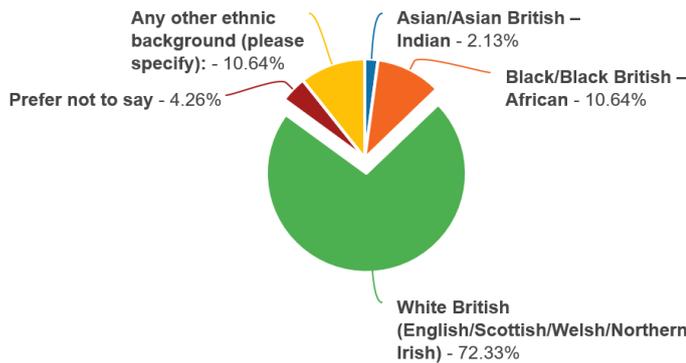
Age:



Gender:

96% of respondents were female, 2% were male; and 2% preferred to not say.

Ethnicity:

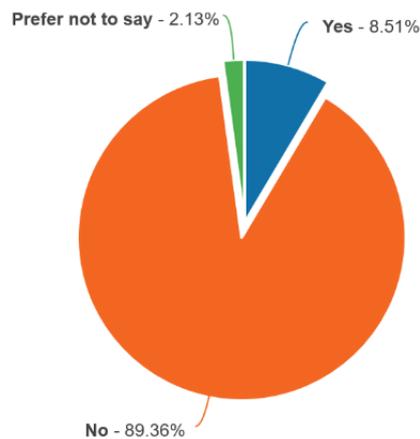


Religion:

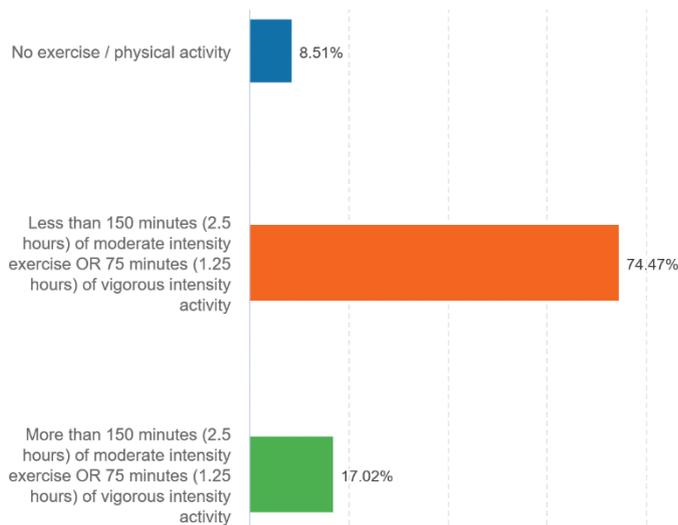
20% said they were Christian, 3% said they were Catholic, 3% said they were Church of England, 7% were Agnostic, 1% said Spiritual, with the remainder saying they had No Religious Belief.

Health demographics

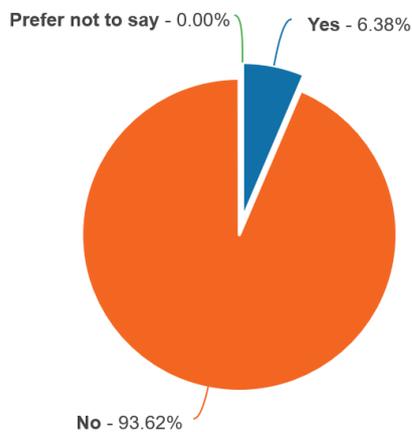
Do you consider yourself to have a disability?



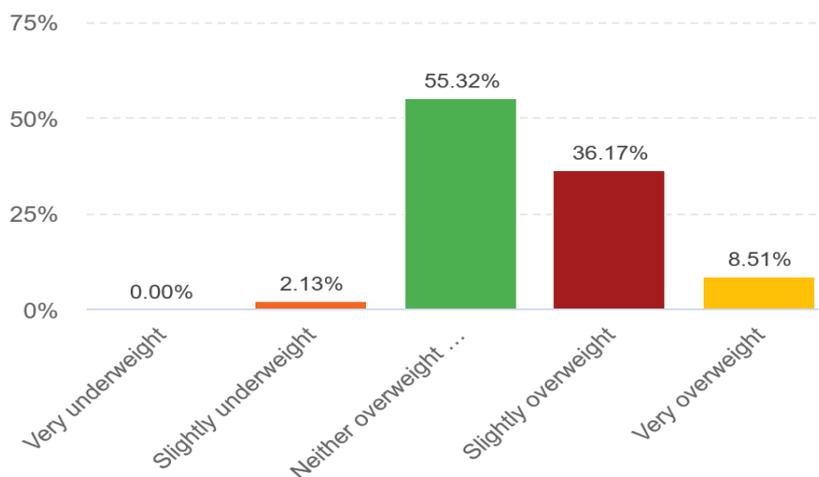
How often do you undertake any regular exercise/ physical activity per week?



Are you a smoker? Please tick yes even if this is only 1 cigarette per day.



In relation to your weight, do you consider yourself:



We also asked whether people knew what their Body Mass Index (BMI) was. The BMI is a measure that uses height and weight to work out whether a person's weight is healthy. **55%** did **NOT** know their BMI, **36%** said they knew what their BMI was, and the remainder of respondents said they were not sure.



healthwatch

Milton Keynes

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