# MATRIx Study Women and families



# Recommendations for women - Navigating the system

One in five women will experience psychological or emotional difficulties during pregnancy and the first year after birth. These include anxiety, depression, and stress-related conditions. Research has shown that only about half of women with perinatal mental health problems are identified by health services and even fewer receive treatment.

The MATRIX study was carried out to try and find out the reasons for this. The MATRIX study also led to the development of recommendations for health services to prevent women falling through the gaps.

# **DECIDING TO SEEK HELP**

During pregnancy or after birth you may experience feelings and thoughts which aren't usual for you.

#### These may include:

- Feeling hopeless
- 2. Not being able to stop crying
- 3. Feeling you can't cope
- Poor concentration or memory
- Feeling on edge or worrying about many different things
- 6. Intrusive thoughts about your baby
- 7. Irritability or anger
- 8. Flashbacks or nightmares related to your birth
- 9. General aches and pains
- 10. Extreme tiredness
- 11. Sweating, breathlessness, feeling sick, trembling

If you experience any of these, or have any thoughts or feelings that don't feel right, seek help. You can contact your midwife, health visitor or GP about any concerns you might have.

# WHO CAN I CONTACT AND WHAT ARE THEIR ROLES?



## A midwife

Midwives provide care and support whilst you are pregnant, throughout labour and during the early period after your baby is born (could we add that it's usually up to 6 weeks after baby is born if that is correct?).



## A health visitor

Health visitors are trained nurses. They specialise in working with families with a child aged 0 to five to identify health needs as early as possible and improve health and wellbeing. You should be referred to the health visitor by your midwife.



# A General Practitioner (GP)

GPs are doctors who are trained to treat all common medical conditions and refer patients to hospitals and other services, including mental health services.

All health professionals working with women during pregnancy and after birth should be aware of perinatal mental health difficulties, and will know, or have the ability to find out, how best to help you.

# **CONTACT WITH HEALTHCARE PROFESSIONALS**

The MATRIx study found that sometimes when women contact health professionals about their mental health difficulties or symptoms, they may be dismissed. If this response doesn't feel right to you, it is important to go back again, either to the same health professional or a different one.

**Partners and family.** It is important to encourage your partner/family member to continue to seek help until the right care is accessed. Sometimes this can be difficult, but it could make all the difference.

# ASSESSMENT/SCREENING

After making contact with a health professional about your symptoms or difficulties, they may ask you to complete some questionnaires. These enable the health professional to work out what you are experiencing and how this is impacting you, in a standardised way. This is called assessment. During pregnancy and after birth, your midwife or health visitor may ask you about your mood. NHS guidelines say every woman should be asked about their mood during pregnancy and after birth. This is called screening. You can find out more about possible assessment/screening tools **here**.

# **DECIDING TO DISCLOSE**

The MATRIx study found that during assessment and screening women may be worried about telling the truth due to concerns about the consequences. The most frequently mentioned fear was that of social services involvement, or being seen to be a bad mum. It is important to remember that mental health difficulties during pregnancy and after birth are common, affecting around 1 in 5 women. They do not make you a bad mum.

In terms of social services involvement, according to the main reasons for social services referrals are concerns about child abuse or neglect, family dysfunction such as domestic abuse, and child illness or disability. If a referral is made, the aim of social services is to help you.

# REFERRAL

This step is where health professionals will, with your permission, pass your details on to services that will be able to help you with your symptoms.

# **ACCESS TO TREATMENT**

Partners and family. It is important to offer as much support as possible to ensure your partner/family member is able to access the treatment they are offered. Findings from the MATRIX study suggest the biggest barriers to women accessing treatment are practical barriers such as lack of transport, or lack of childcare, so where possible, offer this support.

# PROVISION OF OPTIMAL TREATMENT

This refers to health professionals and services providing you with the best possible care to meet your needs. If you feel something is not working for you, it is important to voice this with the health professional you are seeing, and discuss other options.

## WOMEN'S EXPERIENCES

**Partners and family.** One barrier to women not being able to make the most out of the treatment offered was social isolation and having no one to talk to. It is important to be supportive and offer a listening ear if this is what your partner/family member wants.





