

Normalising Postnatal Depression and the importance of screening
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Context

- 10-20% of women in the UK are reported to experience postnatal depression (PND) (UK National Screening Committee, 2019). It is likely that this is a vast under-estimation.
- More recent research has reported that it was two out of three young mothers that reported having PND, and therefore is very high (Van Lieshout et al. 2020).
- PND can be severe, leading to suicide and infanticide (Avalos et al. (2016).
- Black women are four times higher, mixed ethnicity women and Asian women two times higher than white women to die during or up to six weeks after pregnancy (Knight et al. 2021).
- Women under 20 were at twice the risk of death compared with women aged 20-29, and those aged 40 years or over were at almost four times the risk of death (ibid).
- Treatments for PND are effective (O'Connor et al. 2019).
- The recommended tool for screening is the Edinburgh Postal Depression Scale (EDPS).
- Women need to be supported in a more holistic way to get access to support, having a conversation with a trusted person helps (Wickberg et al. 2019).
- Women can feel especially stigmatised to reveal they are struggling at a time when they are supposed to be most happy (Hildingsson and Rubertsson, 2022).

Research Findings

- Based on in-depth focus group with six women in Edinburgh there was variability found across the group in terms of screening around PND. 3 were screened using the tool, one woman had been asked 'the question' four months into the support post-birth, and two other women had never been asked any questions at all around PND. All felt that instead of a tool there should be an in-depth conversation to understand how you are feeling.

"The questionnaires aren't great. You feel really low and you can't say what has made you feel like this."

- Two of the women had PND, but it was only through them identifying it themselves, and with support from their partner that they were able to go and ask for specific help. One woman said her GP asked her at the six-week review appointment about PND, which was really helpful. She was the only woman who reported this happening. One woman had a friend who had experienced PND and was instrumental in her getting help, highlighting the importance of peer support.
- Another woman said she felt that with her first birth she had PND but was too afraid to say anything to anybody in case she lost her child.

Conclusion: What do we think needs to happen?

We think that there needs to be a shift **in thinking** so that **PND is normalised** and **asking the questions around this are expected**. **Screening is necessary** and **needs to be implemented** so that all women have a **conversation with a trusted professional**, **removing the stigma** around this issue. We also think the messaging needs to be clearer that **help is available and is effective**.