

Paternal Mental Health

Y Pwyllgor Deisebau | 1 Hydref 2019
Petitions Committee | 1 October 2019

Reference: RS19/10344

Petition number: P-05-902

Petition title: Paternal Mental Health (New Fathers Mental Health)



Text of petition:

In a "landmark move" NHS England will screen and support fathers for their mental health if the partner has a perinatal mental health illness.

The biggest killer in men under 50 is suicide and with a new debate in Parliament we feel the Welsh Government should be following and funding new father's mental health as without the support it can impact on mums and the development of the child.

The National Childbirth Trust "Dads in Distress report in 2015 found 38% of dads worry about their own mental health and 73% worry about their partners mental health.

1 in 10 dads suffer postnatal depression which looks different more anger, drinking, substance abuse and of course dads struggle to bond with their children too.

Fatherhood pressure is different than years ago with same gender couples and stay at home dads support needs to be in place.

Due to lack of support and screening dads often go into other services at crisis point after the relationship sadly has ended.

The Still Face experiment with dads explains the importance of supporting dad for his mental health due to importance of the first 1001 days antenatal and postnatal period.

When supporting all parents it has far better outcomes for the whole family.

We would like Wales to follow NHS England's new long term plan and include fathers.

1. Background

The perinatal period begins at the start of pregnancy and runs until the end of the first year after a baby is born. Perinatal mental health is about the psychological and emotional health and wellbeing of pregnant women and their children, their partners and their families.

During pregnancy (also referred to as the "prenatal" or "antenatal" period) and after the birth of a child (often called the "postnatal" or "postpartum" period), women are at a higher risk of experiencing mental health problems.

The Mind [website](#) states that studies suggest that partners can also experience perinatal mental health problems. Information also on the Mind [website](#) (from 2016) highlights that studies into postnatal depression in fathers suggest that around one in five men experience depression after becoming fathers.

In a news item on the NHS England [website](#) in December 2018, the Chief Executive of NHS England is quoted as saying there is growing evidence of the mental health risk new and expectant fathers face. In the first six months after the birth of a baby, estimates put the prevalence rates of anxiety and depression symptoms in men at up to one in 10, while one in five women will experience a mental health problem during pregnancy and the first year after birth.

According to the charity [NCT](#), the peak time for postnatal depression in men is three to six months after the birth and as with postnatal depression in mothers, it often goes undiagnosed.

The Mind [website](#) lists support that may be available to fathers who have developed mental health problems, which includes visiting a GP and contacting specialist organisations.

Developments in England

It was [announced](#) by NHS England in December 2018 that the partners of pregnant women and new mothers who are themselves suffering from anxiety, depression or more severe disorders such as psychosis will be automatically offered a comprehensive mental health assessment and sign-posted to professional support if needed.

Partners of expectant and new mothers who are seriously unwell will be offered a range of help such as peer-support, behavioural couples therapy sessions and other family and parenting interventions in specialist community perinatal mental health settings or referral to a leading psychological talking therapy programme. Information on action being taken by NHS England in relation to perinatal mental health is set out in the [announcement](#).

2. Welsh Government action

In correspondence from the Minister for Health and Social Services to the Committee on 13 August 2019, reference is made to the Welsh Government's new vision for maternity services in Wales, [Maternity care in Wales; a five-year vision for the future 2019-2024](#), with a central component of its five core themes being family centred care. This policy is said to ensure midwives and maternity staff incorporate a holistic approach to parenthood, including the recognition and detection of emotional and mental health issues and early referral to appropriate support.

The Minister notes that recent improvements in health visiting services has included the development of a 'team around the family' approach and monitoring of any emotional or mental health issues through the universal provision of the '[Healthy Child Wales Programme](#)'.

All health boards are expected to work towards meeting agreed standards for integrated perinatal health services in Wales which were developed by the All Wales Perinatal Mental Health Steering Group (AWPMHSG) by March 2020. These standards include considering the mental health and well-being of fathers/partners.

Other actions reported by the Minister that are being taken by the Welsh Government in relation to perinatal mental health include:

- implementation of the [Mental Health \(Wales\) Measure](#) which provides services at an early stage through the Local Primary Mental Health Support Service with specialist services also provided;
- further developing specialist community services, with perinatal mental health services included as a priority area for the service improvement funding which commenced in 2019, and
- currently consulting on the [Together for Mental Health delivery plan for 2019 to 2022](#), which includes improving access and quality of perinatal mental health services as a priority area.

3. National Assembly for Wales action

In October 2017, the Assembly's Children, Young People and Education Committee published its report on [Perinatal mental health in Wales](#). The Committee's inquiry looked at the overall provision of perinatal mental health services in Wales. One of the inquiry's terms of reference was to explore the current clinical pathway for patients and whether current primary care services respond in a timely manner to meet the emotional well-being and mental health needs of mothers, fathers and the wider family during pregnancy and the first year of a baby's life.

Following consideration of the evidence received, one of the recommendations made by the Committee relates to the specialist support available to mothers, fathers and their children:

Recommendation 22. That the Welsh Government give consideration to developing a specialist health visitor in perinatal and infant health role in Wales

to liaise with - and work in - a multidisciplinary way with CAMHS and infant mental health services, provide specialist support to mothers, fathers and their children, and provide specialist training and consultation to the wider health visiting and early years' workforce, particularly with regard to issues relating to attachment and bonding.

The Welsh Government rejected this recommendation stating that it is for health boards to determine their staffing needs from their existing allocation towards providing community services. In its response to the Committee's report, the Welsh Government also noted that the Healthy Child Wales Programme includes a consistent range of evidence-based preventative and early intervention measures, as well as advice and guidance to support parenting. The programme is said to offer a routine assessment by health visitors of attachment and bonding to support positive parent-child relationships and promote positive maternal and family emotional health and resilience.

The Committee also recommended (recommendation 10) that the Welsh Government ensures work underway to improve access to psychological therapies for perinatal women (and men where necessary) is prioritised given the established link between perinatal ill health and a child's health and development.

The Welsh Government accepted this recommendation. In January 2019, the Minister for Health and Social Services provided follow-up information to the Committee in relation to its progress on perinatal mental health services, which included details of work being taken to improve access to psychological therapies.

Every effort is made to ensure that the information contained in this briefing is correct at the time of publication. Readers should be aware that these briefings are not necessarily updated or otherwise amended to reflect subsequent changes.

