

2012

## **Pathways to care : The experience of new mother's perinatal mental health in rural areas**

Belinda Butler-O'Halloran  
*Edith Cowan University*

Follow this and additional works at: [https://ro.ecu.edu.au/spsyc\\_pres](https://ro.ecu.edu.au/spsyc_pres)



Part of the **Psychology Commons**

# Pathways to care: The experience of new mothers' perinatal mental health in rural areas

Belinda Butler O'Halloran

# Background

- What is Perinatal mental health?
- Figures for Postnatal Depression
  - 15% (1 in 6) following birth
- Figures for Antenatal depression/anxiety
  - 10% in pregnancy – 26% of these will continue  
(Beyondblue 2009)
- Beyondblue – fabulous but urban centric
- Very little research on rural areas
- So... Busselton!

# Current Research

- SA findings

- Emerging evidence suggests people in rural areas experience mental health differently to those in urban areas

(Collins, Winefield, Ward & Turnbull, 2009)

- Stoicism – “push through the tough times”

(Gorman, Buikstra, Hegney, Pearce, Rogers-Clark Weir & McCullagh, 2007)

- Stigma and small towns prevent even picking up a brochure “everyone knows everyone else’s business”

(Fuller, Edwards, Procter & Moss, 2000)

- Tidal model

- Individual differences
  - Total patient focus – whatever that may be
  - Unrealistic? but a great goal!

# Research Design

- Method : Semi Structured Interviews 20 minutes to 60 minutes (recorded)
- Procedure : Word of Mouth, Snowball
  - Information letter sent
  - Consent form signed
- Ethics : Approval by Ethics Committee ECU
- Participants recruited from Busselton
  - 8 new mothers (children under 3 years)
  - 2 General Practitioners
  - Child Health Nurse
  - Midwife
  - Social Worker
  - Psychologist
  - Perinatal Mental Health Worker



# Findings

## **More professional support**

- Long gaps between visits
- Need to include psychologist
- Home visits were great

## **Time management**

- Need to continue with chores
- Unable to do the chores
- Resent the amount of work
- Change from task to relationship building

## **Isolation**

- First 6 weeks no one to talk to
- Change mindset into being at home
- Don't know what to do

## **Preparedness**

- Feeling unsure of what to do
- Difficulty adjusting to changes

## **Mothers Group**

- Need to connect earlier
- Find sharing info beneficial
-

# Limitations

- Because the women were recruited by word of mouth the group may have been quite homogenous which may not represent Busselton as a whole.

# Recommendations

- Mental Health Professional as part of the Community Health Centre to provide continuity of care
- Increase level of awareness through more frequent interaction with new parents
  - Antenatal classes
  - Mothers groups
  - Hospital visits
  - Home visits



# Conclusion

- New mothers have a knowledge of PND but are uncertain about level of distress – how bad do you need to feel to seek help?
- Ease of access to help needs to be improved
- Perinatal Distress can be reduced in Busselton through
  - early intervention
  - continuity of care