

CLAHRC BITE **Brokering Innovation Through Evidence**

20 A bite-sized summary of a piece of research supported by NIHR CLAHRC West Midlands

July 2016



Does lay support for pregnant women improve health of mothers (and children) with identified social risk factors?

A trial to establish the effectiveness of a 'Pregnancy Outreach Worker'

- A Pregnancy Outreach worker (POW) service for first time mothers with identified social risk factors (such as teen parent, drug/alcohol misuse and/or smoking) was evaluated by a randomised trial.
- It was hypothesised that this service might improve engagement with maternity services (and thereby mother and baby birth outcomes) and reduce postnatal depression.
- First time mothers over the age of 16, who were less than 28 weeks pregnant and who were found to have social risk factors were eligible to be recruited.
- Outcomes included engagement with antenatal care (assessed by number of visits attended), and maternal postnatal depression, assessed using the Edinburgh Postnatal Depression Scale (EPDS) 8-12 weeks after birth.
- Women were recruited from three maternity trusts in Birmingham (16 community midwifery teams) and were randomly allocated to standard care or the addition of referral to the POW service.

POWs were integrated into the community midwifery teams and were trained to provide individual case management and support.

Objectives were to encourage women to attend antenatal appointments, make healthy lifestyle choices, provide social/emotional support, and help ensure benefits, housing difficulties and mental health problems were managed. In the postnatal period (the six weeks following childbirth), POWs also provided advice about breastfeeding and how to care for babies.

Findings:

- 1,324 women were randomised. Analyses included 613 women who received standard care, and 600 who were additionally referred to the POW service.
- No difference was seen in the number of antenatal attendances in each arm (the recommended ten visits).
- For women with two or more social risk factors, mean EPDS was significantly improved with the addition of the POW service, but there was no difference for the group as a whole. Mother-to-infant bonding was improved for all women.
- If this information is added to existing evidence, it shows overall benefit from lay interventions in preventing postnatal depression. This finding is important for women and their families given the known effect of maternal depression on longer term childhood outcomes.

Reference

Kenyon S, Jolly K, Hemming K, et al. Lay support for pregnant women with social risk: a randomised controlled trial. *BMJ Open*. 2016.6(3):e009203. [<http://goo.gl/HIULYf>]



Recommendations for Practice

Additional lay support for first time mothers with identified social risk factors is likely to reduce postnatal depression in women with two or more social risk factors, but does not appear to have an effect on engagement with maternity services in a UK setting.

What is NIHR CLAHRC West Midlands?

The Collaboration for Leadership in Applied Health Research and Care (CLAHRC) is a partnership between universities (Birmingham, Warwick, Keele & Aston) and a number of health and social care organisations in the West Midlands. We are funded by the National Institute for Health Research (NIHR) with a mission to undertake high-quality applied health research focused on the needs of patients to improve health services locally and beyond. For further information, visit:

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The research is funded/supported by the NIHR. The views expressed are those of the author(s) and not necessarily those of the NHS, the NIHR or the Department of Health.