

Avenues for Mainstreaming Perinatal Mental Health: What, Who and How?

(Jhpiego supported plenary session at South Asia Federation of Obstetrics and Gynecology conference)

Mumbai | 23-24 Sept 2023

The *South Asia Federation of Obstetrics and Gynecology (SAFOG)* successfully accomplished its 14th conference at Mumbai on 23-24 September 2023 with the theme of “*Cutting edge management in OBGYN*”. SAFOG is a group of OBGY societies of countries in the South Asia region i.e. India, Pakistan, Bangladesh, Nepal and Sri Lanka. This is a very crucial and important forum as it represents almost 25% of the population of the world and reports almost one fourth of the maternal deaths. The technical discussions and interventions taken up in this forum has huge impact not only for the region but also globally.

Jhpiego India has always been on the forefront of bringing cutting edge technology and programmatic innovations for reducing maternal mortality and morbidity. On these lines, Jhpiego facilitated and supported a plenary session at this conference with the theme “**Avenues for Mainstreaming Perinatal Mental Health (PMH): What, Who and How?**”. The session was graced by key officials and experts- *Dr Pawan Kumar* (Addl. Commissioner-Maternal health, FP, Immunization, MoHFW, GoI); *Dr Preethi Reddy* (Expert Psychiatrist on PMH from NIMHANS); *Dr H D Pai* (President-FOGSI); *Dr Shyam Desai* (President-SAFOG) and *Ms. Moni Sagar Sinha* (Division Chief-USAID India).

Dr Parag Bhamare (Country Lead-MNH) initiated the session with an overview of Perinatal Mental Health situation in India and Jhpiego’s efforts towards addressing it at multiple levels including a demonstration project at Jabalpur (MP) and creating enabling environment at state and national level. Dr Suranjeen Prasad (Director- Strategy and Partnerships) taken forward this discussion with the panelists and moderated the session. All panelists highlighted and underscored the importance of PMH and shared their expert comments for taking this agenda forward.

Dr Pawan Kumar deliberated upon the key Govt of India programs like SUMAN, LaQshya, PMSMA that have contributed significantly in reducing MMR of the country to double digits. He emphasized the need to focus on unexplored areas of maternal morbidity and mortality like PMH, maternal nutrition with targeted but integrable models of interventions. He recognized the role of private sector as crucial stakeholder in taking various Govt programs to the masses.

The expert psychiatrist on PMH from NIMHANS **Dr Preethi Reddy** mentioned the mental health issues during the perinatal period and their impact on mother, child and entire family. She spotlighted the role obstetricians in early identification of PMH symptoms during the ANC and PNC period and its appropriate management including prompt referral.

Dr H D Pai stressed upon the need to look into the PMH explicitly as mental health during pregnancy and postpartum is not prioritized due to lack of awareness and stigmatization, even among doctors. Private doctors take care of a large proportion of the 30 million deliveries that happen every year in India. With shortage of psychiatrists and stigma around visiting them, the obstetricians can do the primary screening and non-pharmacological management for mild and moderate cases. FOGSI is also planning to include standard around PMH in existing 16 Manyata standards.

As the SAFOG presidency is now with India; **Dr Shyam Desai**, the newly elected SAFOG president, accentuated the need of addressing PMH not only in the country but in entire region. He highlighted the prevalence of PMH issues in the region ranging between 9.5% to 39% across ANC/PNC period. SAFOG is already in discussion with NIMHANS for rolling out an online training program on PMH for OBGYN of the region. He commented that SAFOG will facilitate and bring together a multi-disciplinary group of experts from diverse fields of research and clinical practice across countries for cross learning of best practices for improving PMH in the region.

Ms. Moni Sagar Sinha (USAID-India) pointed out the total apathy of the family and even health care providers towards new mother once the baby is born. All the attention is diverted towards the newborn and sufferings of the mother are totally brushed under the carpet even by the doctors. This needs to be addressed with all the efforts as mentioned by other panelists. Its high time to shift the focus to areas of critical maternal morbidity that contributes significantly- PMH is one of them, and the other one is maternal nutrition.

The discussion was supported and reinforced by comments from **Dr Ashma Rana (Past President- NESOG, Nepal)** and video message from **Dr Rubina Sohail (Professor, OBGY, Pakistan)**. The plenary session concluded with summary and way forward by **Dr Priti Kumar** (Chair-Perinatal Health Committee, SAFOG).

The plenary session was complemented with **exclusive article** from Jhpiego on “**Mainstreaming of Perinatal Mental Health in South Asia Region**” in the conference souvenir. It talks about the situation of PMH in the region, challenges to address it, learnings from India, insights of human centric design work from demonstration project at Jabalpur and proposed way forward for collaborative efforts in the region.

The dedicated session on PMH on a South Asia regional forum has been a critical step in creating enabling environment around this unexplored and unaccounted domain of maternal health. This has stimulated the discussions among key stakeholders for taking this agenda forward in a comprehensive, structured and integrable manner. The learnings from one of its kind demonstration projects in Jabalpur and other state & national level activities; will be shared across the borders in the region. Simultaneously, the best practices proven effective in member countries can be leveraged in the region through events like this.

Glimpses from the event:



Dr Pawan Kumar
 (Addl. Commissioner-Maternal health, FP, Immunization, MoHFW, GoI)

Panelists (Clockwise)
 Dr H D Pai; Dr Preethi Reddy; Ms. Moni Sagar Sinha; Dr Shyam Desai





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Prioritise perinatal mental health to ensure good health & wellbeing of both the mother and baby. Catalyzing dialogues with experts & policy makers at @fogsiofficial's 14th #SouthAsianFederationofOBGYN conference.

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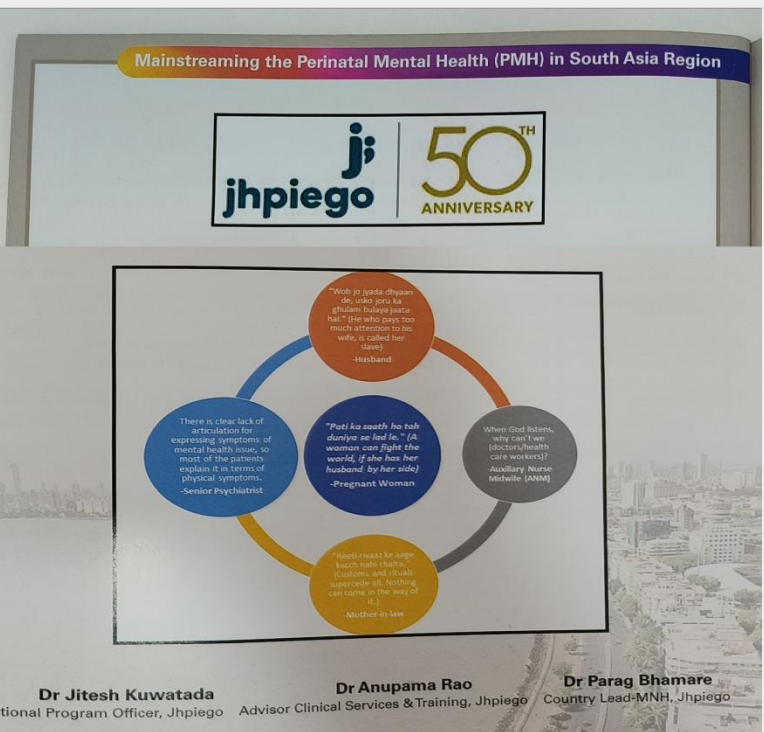


Parag Bhamare and Suru Pallipamula

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Souvenir: Exclusive article from Jhpiego on "Mainstreaming of Perinatal Mental Health in South Asia Region"



Mainstreaming the Perinatal Mental Health (PMH) in South Asia Region



Background:

The perinatal period, encompassing pregnancy and the postnatal phase, presents a unique set of psychological challenges for women due to the significant physiological and hormonal changes they undergo during this time. The emotional, physical, and social demands of pregnancy and childbirth can be overwhelming, making women more susceptible to developing perinatal mental disorders. Additionally, women facing adverse circumstances such as familial conflict, abuse, financial constraints, or pregnancy complications are at even higher risk of experiencing mental health issues during this critical period.

Perinatal mental health disorders/conditions contribute to significant morbidity, disability and even mortality among pregnant women and mothers and are associated with significant social and economic impact. The stigma and discrimination associated with mental health conditions, in addition to social exclusion, discourage health-seeking behavior and compel women who are affected, to suffer in silence and lead a poor quality of life. This leads to severe long-term impact on the mother, child and their families.

Prevalence of perinatal mental disorders in low and lower-middle-income countries tends to be higher compared to their prevalence in high-income countries and wide variations have been reported between countries in some regions. South Asia is the most densely populated region in the world with a high pregnancy rate. The region accounts for the second highest maternal mortality rate globally. Countries in South Asia - Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan, and Sri Lanka - are predominantly economically underprivileged. Despite a number of initiatives to improve maternal health, perinatal mental health remains largely overlooked in the region.

Recognizing the crucial impact of perinatal mental health on women's well-being and the health of their babies, it is essential for policymakers and healthcare providers to acknowledge this issue and prioritize maternal mental health in their agendas. Developing comprehensive strategies and support systems for perinatal mental health is crucial to ensure that women receive the necessary assistance and care during this vulnerable phase.

Learnings from India

Perinatal mental health in India is gradually making its way into mainstream healthcare systems. Policy initiatives like the National Mental Health Program and the Mental

Healthcare Act 2017 have made significant strides in prioritizing perinatal mental health, signaling a positive step towards addressing the mental well-being of expectant and new mothers. Some states, including Kerala, Karnataka, and Telangana, have taken proactive measures by initiating screening programs for perinatal mental health, exemplifying their developed special module on PMH for health care providers. The state of Madhya Pradesh has pursued accessible mental health support in the TeleMANAS program, recently launched by Govt. of India. Thus, Govt. policies, programs for mental health and the specific targeted interventions in states are crucial efforts towards addressing PMH issues.

Long way to go:

Even with increasing traction for PMH, yet, there remains a pressing need for a dedicated policy focusing on perinatal mental health, providing a comprehensive plan that encompasses all state governments to address this critical aspect of healthcare. Crucial areas of focus include the identification and screening of mothers for mental illness, ensuring accessibility to effective treatment options, and improving mental health literacy, pathways to facilitate timely and appropriate care. To achieve robust referral pathways, and develop evidence-based models specifically designed to cater to the well-being of mothers and infants. Additionally, prioritizing training for healthcare providers in perinatal psychiatry is vital to enhance the quality of care delivered to expectant and new mothers. Furthermore, the adoption of evidence-based and cost-effective interventions is of paramount importance. However, the limited availability of Mother-Baby Units (MBUs) for severe mental illnesses, especially psychosis, needs to be addressed to provide comprehensive care to those in need.

Proposed strategy for mainstreaming PMH:

PMH is a multifactorial condition and need similar multi-pronged approach to enable its integration into existing MNH services in public as well as private:

1. Community level Health Promotion interventions and improving mental health literacy.
2. Early identification by screening through the use of a standard screening tool by front line health workers in public and private sector.
3. Psychosocial management and enabling referral from primary health care facility/private OBGY facilities
4. Diagnosis and initiation of treatment by mental health specialists at secondary & tertiary health care facilities.
5. Access to treatment by referral to higher level centers, initiation of treatment and ensuring regular supplies and treatment adherence.

These system strengthening efforts in PMH can be brought about by integrating with initiatives like district mental health programs, capacity building, tailored approaches, and addressing stigma. We should prioritize fostering collaboration between sectors and addressing stigma. We should prioritize fostering collaboration between sectors and addressing stigma. The key steps include providing comprehensive care services, training primary healthcare workers, adopting e-health initiatives, conducting awareness programs, collaborating with

stakeholders, and integrating mental health within the existing healthcare framework.

Exciting prospects lie ahead, such as telemedicine initiatives, corporate engagement, preventive care efforts, wellness clinics, digital connectivity, and targeted training for healthcare professionals. Midwife and primary healthcare worker training programs present opportunities to enhance early identification and support for maternal mental health needs.

Private sector can play Accelerator's role:

In the past two decades, clinicians' attitudes towards mental health have significantly evolved, presenting a timely opportunity for integrating perinatal mental health and driving a global transformation. FIGO, acknowledging the significance of mental health considerations, is dedicated to developing a practical questionnaire for routine screening to bridge the gaps in mental health screening. Collaboration with other organizations, implementing a step-by-step approach, including one-on-one discussions, hand-holding, and recommendations, is suggested for effective training of obstetricians. SAFOG, in partnership with NGOs and stakeholders, can organize training programs to create master trainers who can disseminate knowledge and skills nationwide, driving positive change in the field.

Together we can:

The South Asian region is one of biggest providers of specialist mental health human resources to rich countries, but paradoxically mental health systems in this region are highly inadequately resourced which has resulted in a huge treatment gap of around 900%. In order to address the huge and largely unmet burden of mental health disorders in the region, it is essential to scale-up evidence-based interventions by progressively strengthening existing mental health systems. The implementation of mental health programs at national level is very poor in most of the South Asian countries. Planning of mental health programs should be based on robust situational analysis and needs assessment and the components of mental health program should be integrated with other national health programs. Political commitment to improve public mental health resources, alongside a strong mental health policy framework with strategies for efficient implementation, equitable distribution of human and financial resources, increasing access to mental health services and contextualization of mhGAP guidelines and delivery through an emphasis on task sharing and active involvement of the NGOs and private sector are some of the approaches that can address the barriers in scaling-up mental health services.

Demonstration project of Jhpiego in PMH

Considering the importance of the "Mental Health" in "Maternal Health", Jhpiego India, supported by USAID Momentum, has started the demonstration project on mainstreaming PMH in existing health care system in Jabalpur district Madhya Pradesh). It is aimed to gather insights from all the key stakeholders (with pregnant women/mothers being at the

core of it) for designing the contextually relevant, feasible and readily integrable model of PMH mainstreaming and further its demonstration in the district. The Human Centric Design (HCD) was used to understand the perspectives of pregnant women, lactating mothers, their partners, families, other important community stakeholders (village head, faith healers etc.), health care providers (from village to district), Govt officials at district level and community-based organizations. This project is also bringing the Health and Neurosciences, Bangalore to partner with the efforts in Jabalpur, as technical India is trying to create a positive momentum around PMH agenda in the country and beyond. The plenary session on PMH in this SAFOG Conference is the crucial component for taking this momentum forward in the region. The learnings from this demonstration project at Jabalpur, will definitely show the way forward for converting PMH-related policy into program and finally into implementation to reach the mother for whom it is intended to.

Shidhaye, R., Sikander, S., Jordans, M., De Silva, P., Chatterjee, S. (2015). Mental Health Programs and Policies in South Asia: Initiatives and Obstacles. https://doi.org/10.1007/978-94-017-9017-8_7



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