

PATH – A Retrospective



The **PATH (Perinatal Mental Health) Project** was designed to help expectant and first-time parents a helping hand to prepare physically, socially and mentally for the many challenges a new family brings. Prenatal stress is often caused by body changes and psychological changes, but upcoming childbirth, family, financial and professional adjustments can add to this. Research shows that 1 in 5 women struggle with depressive symptoms and/or anxiety during pregnancy and the first year postpartum. Addressing these symptoms early can prevent more severe mental health issues and improve overall wellbeing for both parents and their families. Partners sought to contribute to the prevention of mild and moderate forms of perinatal mental illness (PMI), and to the ability to effectively screen and successfully support women, families and caregivers with regard to PMI.

The **PATH** partnership jointly developed a range of tools and courses for parents, professionals and employers. A key element of this is an online digital platform, the **PATH** hub, which offers a wealth of information, training and tools to support families and professionals working with them. The hub and its component elements have been evaluated, including pre- and post- measurements, providing insight into their use across different social groups, depressive symptoms, prior knowledge, and so on. The evaluation concluded that much of the training and many of the tools yielded good results, achieving the project's objectives of reducing depressive symptoms, reducing stigma, and increasing knowledge and awareness. Multimedia campaigns throughout the project reached millions of people.

Supporting perinatal mental health early can prevent the long-term costs associated with untreated mental health issues, such as:

- Ongoing healthcare costs for more serious mental health conditions (e.g. depression, anxiety disorders).
- Costs of child mental health issues resulting from parental mental health struggles (e.g. developmental delays, behavioural issues).
- Social service costs and potential involvement in child welfare services due to untreated mental health concerns.
- Costs of absenteeism and reduced workforce participation – fewer than 29% of first-time mothers return to work full-time in the first 3 years after maternity leave.

In terms of scaling up the project, in 2021 there were 613,936 maternities (women giving birth) in England and Wales, resulting in 625,008 live births. 1 in 5 of these women will suffer from PMI: over 120,000 women. Not all of these women will seek help; if **PATH** were to reach 20% (25,000) it could prevent a portion of the costs associated with hospital admissions, therapies, and ongoing treatment. Each person receiving early intervention for PMI could save the healthcare system £1,000–£3,000 annually in mental health treatment costs.

One participant said: "It is such a relief to know that how I feel is normal and natural and that I am not alone."