Supporting perinatal anxiety in the digital age: an exploration of stressors and support

Conference or Workshop Item

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Supporting perinatal anxiety in the digital age: an exploration of stressors and support

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Perinatal Anxiety & eHealth

- Dearth of research in this area
  - Perinatal Anxiety (PNA) and its treatment has received comparatively little attention in comparison to Postnatal Depression (PND)

- Lack of support for women in perinatal period
  - Approx 20% women may experience anxiety in this period (Dennis et al, 2017)
  - Possibly more frequent and independent of PND (Glasheen et al. 2010; Leach et al, 2017; Paul et al. 2013)
  - Few women experiencing PNA will seek help or be identified as needing treatment
  - …even fewer will receive efficacious treatment (Gavin et al, 2015)

- eHealth may be particularly helpful for this cohort, as they may help to overcome barriers to treatment
  - e.g. heightened stigma, reduced time/flexibility…
  - Mobile phone ownership at saturation point
Perinatal Anxiety & eHealth

- Research suggests computerised intervention programs:
  - are effective for the treatment of depression and anxiety disorders
  - have comparable effect sizes to face-to-face treatment (Harrison et al, 2011)

BUT… Moore & Harrison (2019)
- Existing online information problematic in terms of:
  - Accuracy of information about symptoms, impact, treatment & screening
  - PNA conflated with PND in majority of cases
  - Resources to help and support mothers – little guided support available
  - Credibility and evidence base

CURRENT RESEARCH AIM
- Explore women’s experiences of PNA to help inform future online support
Focus Groups

- Focus groups with women in the perinatal period to explore:
  - women’s experience of anxiety triggers and support in the perinatal period
  - what online support is likely to be acceptable for women with PNA

- Recruitment through social media, relevant forums (e.g. MumsNet), and baby groups.
  - Five focus groups took place in both urban and rural locations
  - 23 women took part; predominantly White, British, educated and primiparous

- Inclusion criteria:
  - Women were pregnant or had a baby in the last 12 months
  - Aged 20-45 years
  - Living in the UK and fluent in English
  - Had experienced anxiety during the perinatal period
Sources of Anxiety: Themes

1. Unrealistic expectations of birth and motherhood
   - Expectations of childbirth
     - expectations of transition into motherhood were unrealistic, and often poorly managed
     “I felt there was a lot of misinformation about what an intervention would be like… which made me unnecessarily anxious.”
   - Expectations of breastfeeding
     - women felt unprepared for the realities of breastfeeding, and reported feeling “shocked” and “anxious” when they encountered difficulties
     “(antenatal classes) show you this video of a five month old baby breastfeeding quite happily in some sort of coffee morning, and it’s absolutely easy. But then the reality is so different. And I felt just a bit tricked by the whole lead up to having a baby…”
Sources of Anxiety: Themes

1. Unrealistic expectations of birth and motherhood cont’d
   - Unrealistic guidelines and norms
     - developmental milestones frequently reported on mum-focused websites often caused anxiety
     - childcare guidelines often “unrealistic” and offered no alternative suggestions

   “It worries me when things like the Babycentre say like at eight months your child should be doing this, especially sleep and feeding… you feel like you’re just doing everything wrong.”

   “I don’t know any mum who was able to put their child in a moses basket on their back from day one, and it just causes you an enormous amount of anxiety. So what are you meant to do?”
2. Judgement and Stigma

- Societal pressure
  - significant pressure to be the ‘perfect mum’ and to do ‘the right thing’
  - social and mainstream media promoting unrealistic images of motherhood

  “I think they put so much pressure on a mother by saying breast is best which means… yes it’s all positive. But… if you don’t succeed then… you’ve failed as a mother, you’ve failed your kids…”

- Mental health stigma and disclosure
  - feeling ashamed of their PNA symptoms, and reluctant to disclose to them

  “I fear that if I went to somebody saying look I really suffer from anxiety, I get worried on who’s going to get involved with my kids.”
  “I felt like I couldn’t talk to anyone about it, because I didn’t think it was normal and I felt like it was me not being a good mum”
3. Peer “Support” (Forums)

- Online forums as negative
  - large scale forums were predominantly seen as anxiety-provoking, rather than relieving
  - negative, conflicting and polarising information described as causing uncertainty and anxiety

“It definitely increases anxiety – those big forums definitely do. Because nobody wants to post when things go well. They just say terrible things…. that just made me really paranoid.”
3. Peer “Support”

- Online forums as positive
  - smaller or focused forums seen as helpful

- **BUT** offline peer support seen as the single most important source of support for women during this period

- Normalisation of experience
  - women felt that they were “not alone”, and that “somebody else understands”
  - promotes the idea that it is normal to deviate from the social ideals

“It was one mum… it was so refreshing, she said I didn’t really enjoy it until he was six months old. And something clicked in my brain then where I was like finally somebody… And suddenly just having someone say it took the pressure off and I could start to enjoy it (and) give myself a bit of a break”
4. Lack of Maternal Confidence, Overwhelm and Uncertainty

- Maternal confidence and overwhelm
  - many women described struggling with the adjustment to motherhood, often due to lack of knowledge and experience
  - many felt out of their depth, and found it difficult to balance the demands of motherhood with those of everyday life

  “I had absolutely no idea about any of motherhood I realised, you know, the practical stuff.”

  “I suppose we all go through our lives being good at a lot of things. You’ve established a career, you’ve established yourself… and then suddenly… this baby arrives and you’re not good at anything.”

- Conflicting or extreme information
  - an overabundance of information and polarising opinions online often left women feeling confused, uncertain, and not knowing what to trust
Sources of Anxiety: Themes

5. Lack of Mental Health Support and Knowledge

- Lack of Postnatal MH Support from Health Care Professionals

“I think that’s why you get the anxiety, isn’t it. Because you’re all geared up to give birth, and then you do it and you get home and you’re like, shit, now I have a baby… and there’s no support really… I had really bad postnatal anxiety, like full on… but no one spotted it.”

- Mental Health Literacy
  - lack of knowledge about PNA and about maternal mental health was anxiety-inducing
  - women reported feeling distressed about being unable to find any information about the way they were feeling either on- or off-line
  - many did not identify with PND symptoms, but were unable to find an alternative explanation of their symptoms which made them feel like they were “just going mad” ;“I didn’t know what was wrong. I thought I’d just lost the plot.”
Suggestions for supporting PNA online

- **Better preparation/management of expectations of birth and motherhood**
  - A need for *realistic*, unbiased and balanced information
  - Expert advice and *evidence-based* information needed

- **Peer support**
  - Moderated, limited peer input recommended; rather than unmanaged, large scale forums

- **Normalisation**
  - Exposure to other mum’s stories: *experts by experience models*
  - Humour as medicine
Suggestions for supporting PNA online

- **Information about PNA symptoms and management**
  - Inclusion of evidence-based information about symptoms – **screening questionnaires**
    - (e.g. PASS; PSAS; PRAQ)
  - Information about anxiety management – **inclusion of real-time therapeutic techniques**
    - (e.g. mindfulness; CCBT)

- **Increasing maternal confidence and general wellbeing**
  - Inclusion of help and support beyond the PNA context – **holistic approach**

- **Appealing website properties**
  - Video and audio content, and minimise text for sleep deprived audience
  - Easy to navigate
  - Easy to find
  - Discreet
Take Home Messages

- The internet has the potential to fill the support gap many women reported experiencing after childbirth.
- Better managing women’s expectations of birth and motherhood, and challenging unrealistic socially constructed ideals of motherhood, is likely to be key to supporting PNA.
- Providing professional, evidence-based support and psychoeducation is likely to go some way to alleviate the confusion and uncertainty women feel, increasing their knowledge and awareness of PNA, allowing for better identification of symptoms and therapeutic support strategies.
- Including evidence-based techniques to help alleviate PNA symptoms, and increase maternal confidence and general wellbeing (most likely using CCBT and mindfulness based activities) is also likely to be acceptable and beneficial.
What Next...?

Open Perinatal Anxiety and Worry Support for new mums

An open access resource providing evidence-based information and tools to help better understand, support and manage anxiety for the first year after birth.

Watch our Perinatal Anxiety video
Thank you!

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OPEN P.A.W.S.
Perinatal Anxiety & Worry Support