

# Perinatal Mental Illness in Canada: How do Canadian Healthcare Providers Feel?

The Society of Obstetricians and Gynaecologists of Canada



## INTRODUCTION

- Consequences of untreated Perinatal mental illness (PMI) can be severe and have negative implications for mothers and children across generations. Canadian data report 33% of new mothers are concerned about PMI, which is likely a very conservative estimate.
- Healthcare providers (HCPs) play a critical role in identification, screening and treatment of PMI, yet the SOGC regularly receives requests for practice guidance.

## AIM

- The purpose of this study was to explore practices, practice and resource needs of Canadian HCPs related to PMI.

## METHODS

- An online survey was developed by a multi-disciplinary expert committee, and informed by a comprehensive literature review.
- The survey was administered to perinatal HCPs (N=290). Multiple choice questions and open text responses focussed on needs, screening, treatment, referrals, and barriers.
- Descriptive statistics were used to report findings by profession, and text comments analyzed using content analysis.

## RESPONDENT CHARACTERISTICS

| Profession                 | n = 290 | %    |
|----------------------------|---------|------|
| Obstetrician-Gynaecologist | 52      | 17.9 |
| Family physician           | 27      | 9.3  |
| Midwife                    | 65      | 22.4 |
| Registered nurse           | 27      | 9.3  |
| Nurse practitioner         | 3       | 1.2  |
| Resident/Fellow            | 9       | 3.1  |
| Other                      | 18      | 6.2  |
| No response                | 89      | 30.6 |

| Primary Model of Practice | n = 290 | %    |
|---------------------------|---------|------|
| Solo                      | 14      | 4.8  |
| Partnered                 | 16      | 6.0  |
| Group                     | 68      | 23.4 |
| Hospital                  | 41      | 14.1 |
| Community                 | 24      | 8.3  |
| Academic                  | 16      | 6.0  |
| Public Health             | 5       | 1.7  |
| Other                     | 14      | 4.8  |
| No response               | 92      | 31.7 |

## RESULTS

- Respondents reported that they frequently encounter patients with anxiety (84%), mood disorders (63%) and psychological aspects of transition to parenthood (60%); they occasionally encounter patients with eating (74%), personality (74%), or substance use (66%) disorders.
- Almost all respondents wanted to know more about PMI in general (91%) as well as the psychological aspects of the transition to parenthood in the prenatal (77.6%) and postpartum (80.5%) periods (Table 1).

**Table 1. Topics on Which Respondents Wanted More Information in Pregnancy and Postpartum (%)**

|                                                                                                                            | %    |
|----------------------------------------------------------------------------------------------------------------------------|------|
| Effects of pharmacological treatments on pregnancy, fetal growth, and development, including effects to breastmilk/feeding | 74.4 |
| Signs, symptoms, and risk factors for perinatal mental illness                                                             | 62.7 |
| Assessment of risk of harm to parent or child (i.e., suicidality, risk of infanticide)                                     | 59.2 |
| Impact of substance use on maternal, fetal, and infant health (including breastmilk/feeding)                               | 59.1 |
| How to screen and assess for perinatal mental illness and interpret the results of a screening questionnaire               | 54.6 |
| Referral processes – who to refer to and when to make the referral                                                         | 54.5 |
| Relationships between mental illness, childbearing, parenting and early relationships                                      | 51.5 |
| Roles of other health care providers (e.g., psychiatrist vs. psychologist vs. psychotherapist)                             | 44.4 |
| Other                                                                                                                      | 5    |

### SCREENING AND COUNSELLING

- Family practitioners felt very confident screening for PMI (69%), but fewer were confident counselling (54%) or treating (27%) PMI.
- A small proportion of obstetricians (8%), nurses (15%), and midwives (16%) felt very confident providing counselling or treatment (1-4%).

### INFORMATIONAL NEEDS

- When asked to identify specific information needs related to the PMI diagnoses, resources were the most frequently reported need across all disorders, followed by information related to screening, and treatment (Figure 1).
- Preferences for accessing education by professional group are shown in Figure 2, and requested resources in Figure 3..

**Figure 1. Specific Informational Needs Related to PMI (%)**

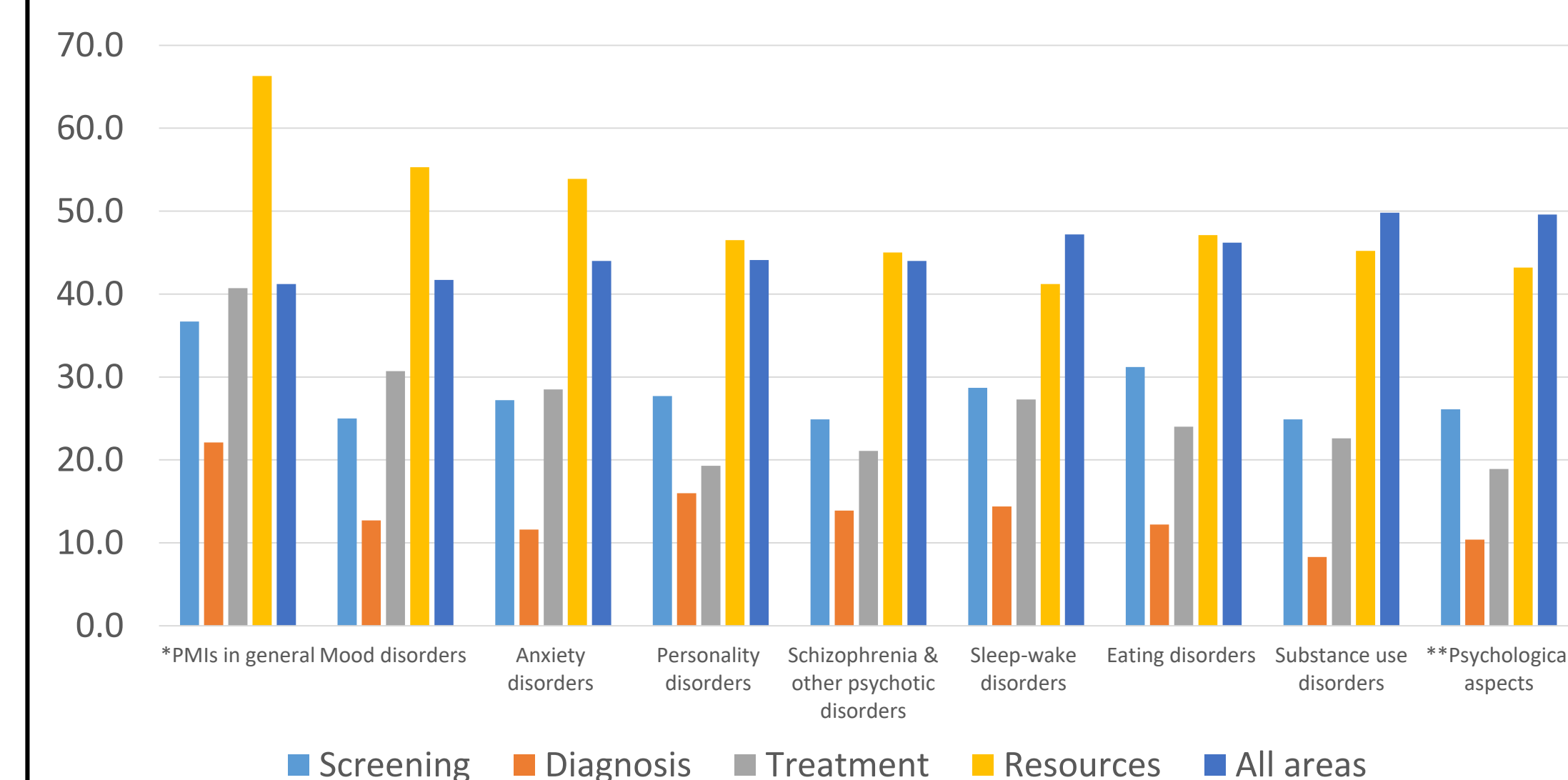


**Figure 2: Preferences for Accessing Education (%)**

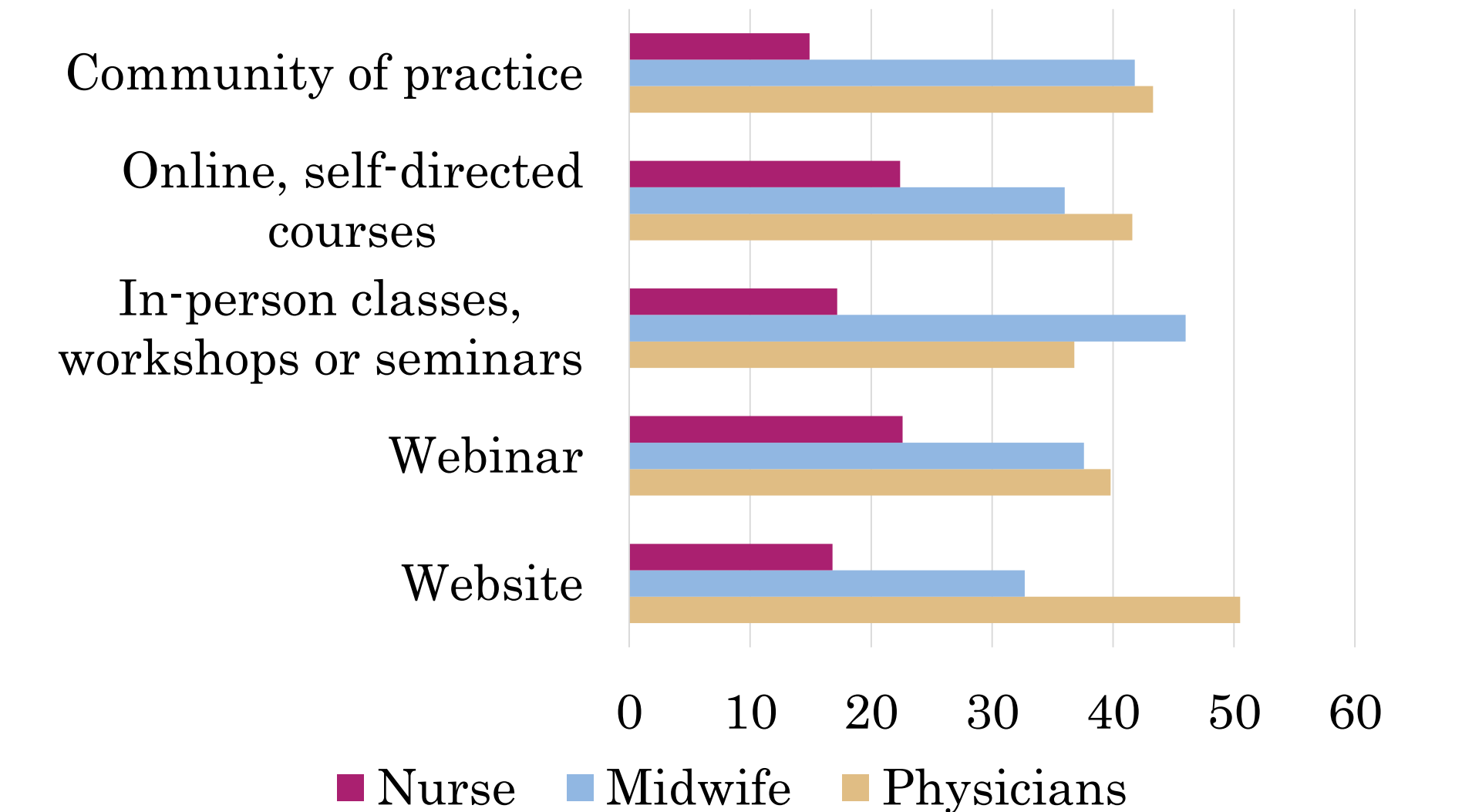
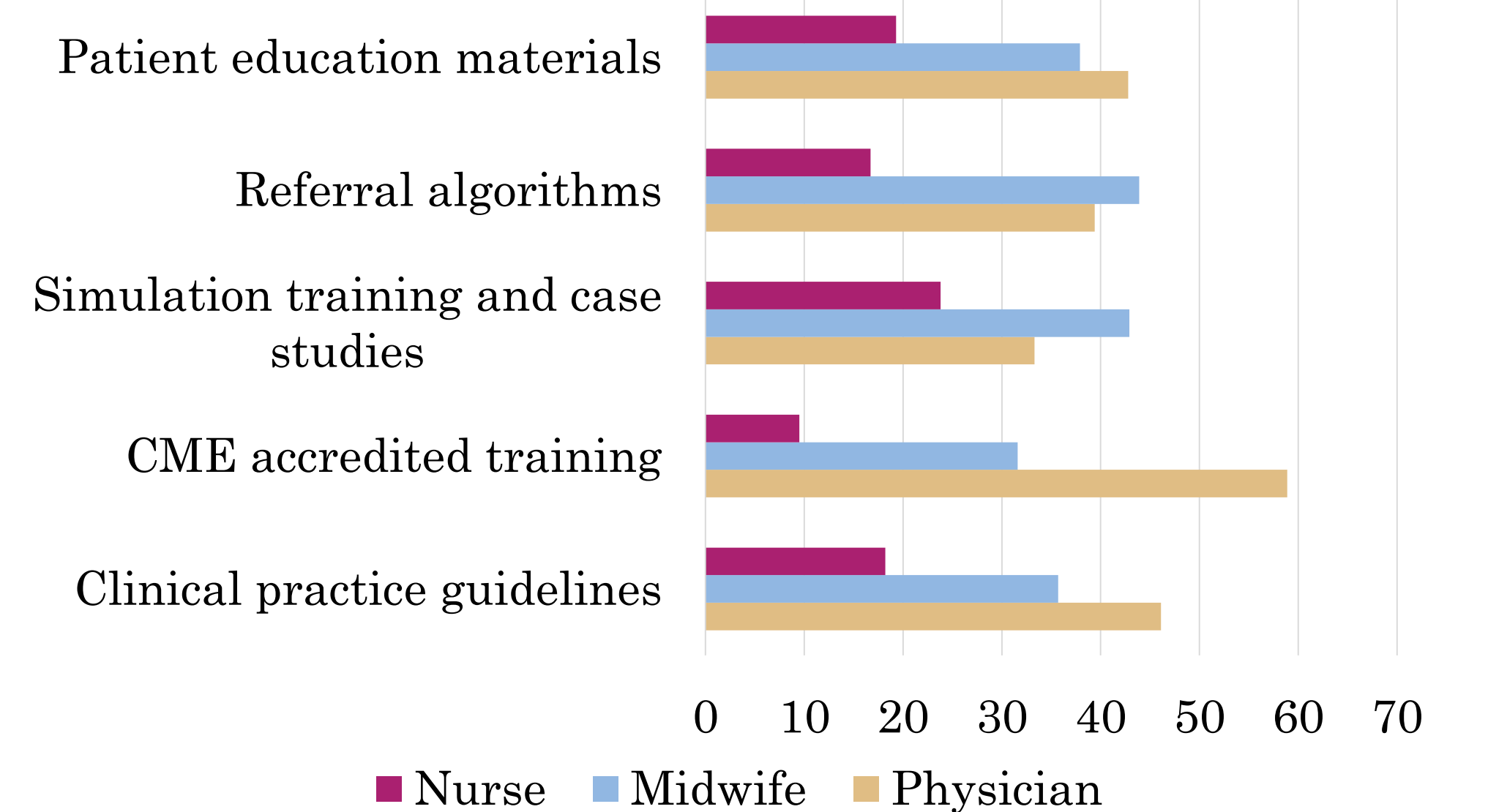


**Figure 3: Preferences for Accessing Education (%)**



## CONCLUSIONS

- Canadian HCPs encounter a high percentage of patients experiencing PMI in their practice and do not feel equipped to manage patients with PMI.
- Canadian HCPs articulated a need to learn more, to receive more guidance and to access resources to care for patients with PMI.
- Results from this survey will inform development of targeted education and resource initiatives, including Clinical Practice Guidelines, in order to increase capacity and improve timely access to perinatal mental health services across Canada.

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## CONTACT INFORMATION

Email: [research@sogc.com](mailto:research@sogc.com)