OUT OF SIGHT, OUT OF MIND

Bereaved parents falling through the gaps in mental health care in Scotland

A briefing by
the Baby Loss Awareness Alliance

#BLAWOutOfSight
2. Introduction

This Baby Loss Awareness Week we are calling on the Government to take action to ensure that all parents who experience pregnancy or baby loss and need specialist psychological support can access it, at a time and place that is right for them, free of charge, wherever they live.

Thousands of parents experience pregnancy or baby loss every year. Grief is a natural response to this particularly isolating bereavement. Some people carry this with them for the rest of their lives but do not develop a mental health problem. However, many bereaved parents will go on to experience psychiatric illnesses that require specialist support, triggered by intense grief and the trauma of their experience.

Information gathered by the Baby Loss Awareness Alliance shows that although there is a clear need for specialist psychological support for this group, too often it is unavailable, inaccessible or inappropriate. Too many people who experience a psychiatric illness after their loss do not receive the support they need. They have been falling through the gaps between policy and funding, and are often overlooked altogether.

Across the UK 60% of bereaved parents told us they felt they needed specialist psychological support for their mental health, but were unable to access it on the NHS. 86% of Health Boards in Scotland told us they do not commission talking therapies specifically for this group that both parents can access.
After my baby died I felt I needed psychological support. I was referred and the support took place in the neonatal ward of the hospital where I gave birth to my dead baby. I had to sit in a waiting room each week while other people’s babies were wheeled past me. The psychiatrist who saw me informed me that my thoughts/grief were unhelpful and wrong and if I just “thought differently” I’d feel better.

(bereaved parent)  

With the current focus on improving mental health, and in particular perinatal mental health, there is an excellent opportunity to tackle this. Further work is needed to develop and evidence the solutions, and we are committed to working alongside decision makers to achieve this.

1. Sands, Survey of Maternity and Neonatal Care, May 2019, sample size of 1,007
2. Baby Loss Awareness Alliance, Out of sight, out of mind: parents falling through the gaps in mental health care, October 2019, www.babyloss-awareness.org
3. Sands, Survey of Maternity and Neonatal care, May 2019, sample size of 1,007
4. ‘Perinatal’ means the period of time covering pregnancy and up to around a year after giving birth.
The National Bereavement Care Pathway (NBCP) provides the framework and tools to ensure that all health professionals are adequately equipped to provide excellent bereavement care during the immediate aftermath of pregnancy or baby loss.

During Baby Loss Awareness Week 2018 we called for this to be embedded and rolled out across the NHS to ensure that all bereaved parents get the best possible bereavement care.\(^5\)

The development of an NBCP in Scotland is being supported by the Scottish Government. A core group of baby loss charities, professional bodies and royal colleges are currently finalising pathway materials and resources, informed by a parent advisory group. Five early adopter sites have been identified and will be launched later in the year.

---

5. Bereavement care is provided by health and social care professionals from the time a parent experiences a loss, or when it is expected the baby will die. It includes all communications with the parent, the care environment, resources and facilities.
In Scotland new investment in perinatal mental health has been announced following the “Delivering Effective Services: Needs Assessment and Service Recommendations for Specialist and Universal Perinatal Mental Health Services” report published in March 2019. This endorses recommendations in The Best Start (Scottish Government, 2017) on ensuring support for bereaved parents prior to discharge and appropriate signposting to third sector services who provide bereavement and other mental health support.

86% of Health Boards told us they do not commission as specialist service accessible to both parents who have experienced pregnancy and baby loss. Many told us that they sign-post bereaved parents to voluntary organisations, however only a few of these are able to offer the kind of psychological support needed by those experiencing a psychiatric illness. Some bereaved parents are referred on to more general psychological support, but parents told us, these services lack the specialist skills and knowledge to support them. Partners’ needs are also often overlooked.

The Scottish Government is supporting the development of best practice in the delivery of counselling services following stillbirth and neonatal death. They are currently working with the voluntary sector to investigate and evidence models of best practice.
What we are calling for

☐ The Governments must:

☐ 1. undertake a review of current provision including an evaluation of models of best practice, involving parents and professionals

☐ 2. develop quality standards and national guidance to support those planning, funding and delivering specialist psychological support services for bereaved parents

☐ 3. ensure that relevant professionals across health services receive mandatory training in the identification of psychiatric illness in parents who have experienced pregnancy and baby loss

☐ 4. provide guidance to support local services to effectively assess the psychological support needs of bereaved parents, and develop referral pathways to meet those needs
Commissioners must:

☐ 5. allocate sufficient resources for the provision of specialist psychological support for bereaved families based on an assessment of their needs

☐ 6. ensure that high quality, specialist services are in place for bereaved parents when they need them

☐ 7. incentivise local services to show how they are meeting the specific needs of this small, but vulnerable group through their inclusion in local data sets and performance measures

☐ 8. provide clear referral pathways to high quality, effective and evidence-based specialist psychological support
How MSPs and MPs can help

- writing to Jeane Freeman, Cabinet Secretary for Health and Sport, asking her to make this a priority
- contacting their local Health Board to find out how this support is offered in their area
- Please forward any responses received to babyloss@sands.org.uk
More information

Download the

Out of Sight, Out of Mind: Parents falling through the gaps in mental health care report

www.babyloss-awareness.org

Telephone: 0203 897 3212
Email: babyloss@sands.org.uk
www.babyloss-awareness.org
#BLAWOutOfSight