



Mental health in pregnancy, the postnatal period and babies and toddlers: how to use the needs assessment report

Contents of the needs assessment report

The report gives commissioners an indication of perinatal and infant mental health need in their area, by bringing together a range of relevant data and evidence on demographics, prevalence and risk factors for each upper tier local authority and clinical commissioning group (CCG).

It covers mental health problems in women during pregnancy and for up to one year after childbirth. It also covers the social development and wellbeing of babies and toddlers from birth to three years old. The report sets out evidence-based information on key population risk factors alongside the data. The evidence is from NICE guidance and other evidence from our expert panel.

Applying your local knowledge

The starting point for writing your local needs assessment should be what you know already. There are a number of reasons for this:

- national datasets can only provide one part of what will be a complex picture of need in your local area
- there are sometimes anomalies in data so it is important to sense check the content of nationally reported data with what you know locally
- you may have data available locally that is useful. For example local authorities could find out up-to-date numbers of looked after children
- you should consider the views of local women and families when commissioning perinatal and infant mental health services

Local discussion

Once you have read the needs assessment report together with any data you have found locally, you should discuss the findings to make sure you have a full and accurate understanding. The following are some suggested points to keep in mind, help you review the data and evidence and then formulate your local needs assessment. Looking at the data and evidence may raise further questions. The report has a 'next steps' section with ideas for where to look for further help and information.

Points to consider when looking at the estimates:

- the report does not present numbers or rates of women or infants with mental health problems. Instead it gives estimates of numbers of women with mental health conditions during pregnancy and the postnatal period, and presents a range of key risk factors that are likely to increase risk in a population
- estimates have been calculated using national estimates for each condition and the number of women giving birth (delivery figures) in the relevant area. They do not take into account any socioeconomic factors, such as deprivation, or other factors that in reality are likely to cause variation between areas
- you will not get an overall estimate of women with a mental health condition by adding all the estimates together. Some women have more than one of these conditions. Definitions for the conditions can be found in the glossary

Points to consider when looking at risk factors:

- these are population risk factors - factors that increase overall risk of mental health problems within a local population. Clinically, women and infants are much more complex with a wide range of reasons leading to individual mental illness
- there are many individual women who develop mental health problems during pregnancy or after childbirth who have none of these risk factors
- the list of risk factors is not exhaustive and there are many other factors that can affect the risk of maternal mental health problems within a population
- likewise, it is well documented that there are many factors in a young child's life that have the potential to impact on his or her current and future development. The risk factors included for babies and toddlers are just some of those which are known to have a potentially significant effect on wellbeing and development
- not all babies and toddlers who experience these risk factors will have development problems. For example, a baby or child with teenage parents is at increased risk of poor outcomes. However, many teenage parents will not have problems with parenting and their children will be healthy and happy
- the data presented is the best available for these risk factors. In some cases, this can only give a rough indication of the number of people affected in your area

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