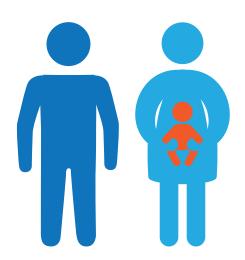




The costs of perinatal mental health problems

Report summary

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Executive Summary

This report sets out the findings of a project on the economic and social impact of maternal mental health problems in the perinatal period, defined as the period during pregnancy and the first year after childbirth.

Perinatal mental health problems are very common, affecting up to 20% of women at some point during the perinatal period. They are also of major importance as a public health issue, not just because of their adverse impact on the mother but also because they have been shown to compromise the healthy emotional, cognitive and even physical development of the child, with serious long-term consequences.

This report seeks – for the first time in the published literature – to provide comprehensive estimates of the costs of perinatal mental health problems, including the adverse effects of maternal mental illness on the child as well as the mother.

Much previous work on perinatal mental health has focused on postnatal depression. However, it is known that mental health problems often occur during the antenatal period and that problems go beyond depression, to include anxiety, psychosis, post-traumatic stress disorder and other conditions. All these problems warrant attention, whenever they occur in the perinatal period.

Maternal depression and anxiety, which often occur together, are at least as common during pregnancy as they are in the year after childbirth. Recent advances in neuroscience and other disciplines clearly suggest that psychological distress during pregnancy is a significant risk factor for a range of adverse outcomes in the child.

Because of limitations in data availability, our cost estimates are restricted to three major perinatal mental health conditions: depression, anxiety and also psychosis (mainly bipolar disorder and schizophrenia). Conditions such as eating disorder are therefore omitted. For this and other reasons, our figures under-estimate the scale and cost of perinatal mental health problems at the aggregate level. The most comprehensive and reliable estimates are those relating to depression.

Key findings in this report are:

- Taken together, perinatal depression, anxiety and psychosis carry a total long-term cost to society of about £8.1 billion for each one-year cohort of births in the UK. This is equivalent to a cost of just under £10,000 for every single birth in the country.
- Nearly three-quarters (72%) of this cost relates to adverse impacts on the child rather than the mother.

- Over a fifth of total costs (£1.7 billion) are borne by the public sector, with the bulk of these falling on the NHS and social services (£1.2 billion).
- The average cost to society of one case of perinatal depression is around £74,000, of which £23,000 relates to the mother and £51,000 relates to impacts on the child.
- Perinatal anxiety (when it exists alone and is not co-morbid with depression) costs about £35,000 per case, of which £21,000 relates to the mother and £14,000 to the child.
- Perinatal psychosis costs around £53,000 per case, but this is almost certainly a substantial under-estimate because of lack of evidence about the impact on the child; costs relating to the mother are about £47,000 per case, roughly double the equivalent costs for depression and anxiety.

Treatment and support for women with perinatal mental health problems are provided by a mix of universal and specialist services and there is long-standing agreement in guidance from NICE and other national bodies on how these services should be organised and what they should provide.

Despite this, the current provision of services is widely described as patchy, with significant variations in coverage and quality around the country. For example:

- About half of all cases of perinatal depression and anxiety go undetected and many of those which are detected fail to receive evidencebased forms of treatment.
- Specialist perinatal mental health services are needed for women with complex or severe conditions, but less than 15% of localities provide these at the full level recommended in national guidance and more than 40% provide no service at all.
- Just 3% of Clinical Commissioning Groups (CCGs) in England have a strategy for commissioning perinatal mental health services and a large majority have no plans to develop one.

A broad set of illustrative estimates suggests that additional NHS expenditure of around £280 million a year would be needed in England to bring perinatal mental health care up to the level and standard recommended in national guidance. This is equivalent to extra spending of around £1.3 million a year in an average CCG. In comparison, aggregate spending on the NHS in England is around £105 billion a year, or around £500 million a year in a typical CCG.

Put another way, the estimated cost of extra provision is equivalent to about £400 per average birth. Our estimates suggest that, in comparison, perinatal mental health problems impose costs of around £10,000 per birth for society as a whole, with costs of around £2,100 per birth falling on the public sector.

Because the costs of perinatal mental health problems indicate the potential benefits of intervention, even a relatively modest improvement in outcomes as a result of better services would be sufficient to justify the additional spending on value for money grounds.

Response on behalf of the Maternal Mental Health Alliance

Perinatal mental illnesses are a major public health issue that must be taken seriously. If untreated, these illnesses can have a devastating impact on women and their families. They are one of the leading causes of death for mothers during pregnancy and the year after birth.

Between 10 and 20% of women develop a mental illness during pregnancy or within the first year after having a baby. Examples of these illnesses include antenatal and postnatal depression, obsessive compulsive disorder, post-traumatic stress disorder (PTSD) and postpartum psychosis. These conditions often develop suddenly and range from mild to extremely severe, requiring different kinds of care or treatment.

The good news is that, with the right help, women can recover from these illnesses. There is

widespread agreement about what services are needed for women affected by perinatal mental illnesses, and, in some parts of the UK, women receive world-class care. However, in many areas perinatal mental illness goes unrecognised, undiagnosed and untreated, leading to avoidable suffering for women and their families.

The Maternal Mental Health Alliance (MMHA) is a coalition of more than 60 UK organisations, including professional bodies and organisations that represent, or provide care and support to, parents and families. We are all too aware of the avoidable destructive impact of perinatal mental illness, and we are not prepared to stand by as women's lives continue to be cut short, and families changed forever, as a result of these preventable and manageable illnesses.

There has been significant progress in knowledge and attitudes about tackling perinatal mental illness in recent years, and some areas of the UK have seen a growth in specialist services. However, the human costs of these illnesses have not been enough to convince all policy makers, commissioners and providers to take the required action: recent research shows that just 3% of Clinical Commissioning Groups (CCGs) in England have a strategy for commissioning perinatal mental health services and a large majority have no plans to develop one. In almost half of the UK, pregnant women and new mothers do not have access to specialist perinatal mental health services, potentially leaving them and their babies at risk.

We commissioned this independent report to document the economic costs of perinatal mental illness for UK society. It shows that perinatal depression, anxiety and psychosis carry a total long-term cost to society of about £8.1 billion for each one-year cohort of births in the UK. We hope that this shocking statistic will motivate policy makers, commissioners and providers to act urgently. It is in their power to do something about this issue: if perinatal mental health problems were identified and treated quickly and effectively, many of these serious and long term human and economic costs could be avoided.

This report also shows the high level of costs falling on the NHS; perinatal mental illnesses cost the NHS around £1.2 billion for each annual cohort of births. In comparison, it would cost only an extra £280 million a year to bring the whole pathway of perinatal mental health care up to the level and standards recommended in national guidance. This is a case for investment that cannot be ignored.

This report is part of the Everyone's Business Campaign, http://www.everyonesbusiness.org.uk, which calls for all women throughout the UK who experience perinatal mental health problems to receive the care they and their families need, wherever and whenever they need it. Local and national providers, commissioners and governments must act now to begin to reduce the human and economic costs of perinatal mental illness to our families, to our society, and to our nations.

Dr Alain Gregoire, Chair, Maternal Mental Health Alliance

Published October 2014

This is a summary of The Costs of Perinatal Mental Health Problems report.

The full report is available from: http://www.centreformentalhealth.org.uk/perinatal and

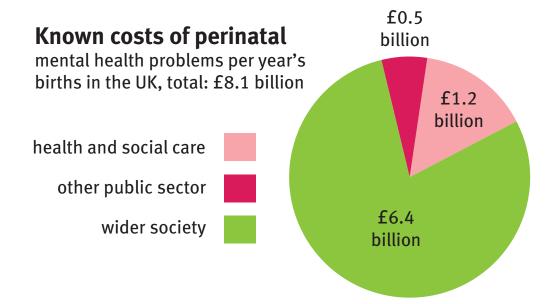
http://www.lse.ac.uk/LSEHealthAndSocialCare/aboutUs/PSSRU/home.aspx





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Key points from the report





Of these costs

28% relate to the mother

72% relate to the child

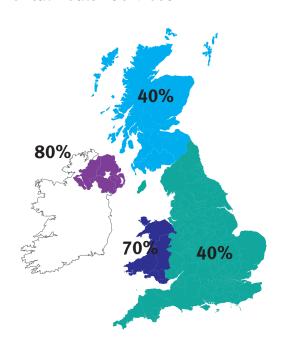


Up to 20%

of women develop a mental health problem during pregnancy or within a year of giving birth

Women in around half the UK

have NO access to specialist perinatal mental health services



Suicide is a leading cause of death for women during pregnancy and in the year after giving birth



Costs v improvement

The cost to the public sector of perinatal mental health problems is **5 times** the cost of improving services.