

My Time, My Space (an arts-based group for women with postnatal depression): a project report

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Abstract

This paper will describe an innovative method of treatment for women with postnatal depression that has been used in the south west of England since 2004 and has now been successfully piloted in other areas of the UK. My Time My Space is an arts-based group for women with postnatal depression that aims to improve mood by reducing social isolation and using creativity to improve self-esteem. Results of the programme will be shared, in addition to the ways in which the project has been implemented using collaborative working with children's centres and building community capacity by engaging local charities. The qualitative results have been collected from participants ($n=30$) over the last two years using post-course evaluation forms with open questions to elicit participants' views. The quantitative results of a small pilot study ($n=8$) based on pre- and post-group Edinburgh Postnatal Depression Scale scores (EPDS) are also reported. The findings suggest My Time My Space has a positive effect on women's mood and perceived social support, and provides an effective alternative or additional method of treatment for postnatal depression.

Key words

Postnatal depression, health visiting, art, social support, collaborative

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Potential competing interests

My Time My Space was developed by Creativity Works, a pioneering creative community development charity. One of the co-authors of this paper is currently employed by Creativity Works. However, the other author has no links with the charity and piloted the approach within a different primary care trust in the south west of England with the same breadth of findings.

Background

There is a growing body of research into the short- and long-term implications of postnatal depression for mothers and their children. It is recognised that 10%–15% of women develop postnatal depression (Department of Health (DH), 2010). However, some studies have shown that recognition of postnatal depression is much lower than this and that many women receive no treatment at all (4Children, 2011).

The Healthy Child Programme (DH, 2009) recommends women diagnosed with postnatal depression receive up to eight 'listening visits' from the health visiting team; however, there are wide variations in the treatment women diagnosed with postnatal depression receive across the UK, with few areas achieving this standard (4Children, 2011).

Postnatal depression has a negative impact on a woman's self-esteem, affecting their confidence and increasing social isolation (Royal College of Psychiatrists, 2010). Women with postnatal depression often experience a stigma around diagnosis and may withdraw from social activities, thereby increasing their sense of isolation. In general, the evidence suggests a lack of social support increases the risk of illness and mood disorders when compared with individuals with good support (Kendall-Tackett, 2007). Conversely, good levels of social support have been shown to contribute to a remission in depressive symptoms (Hoffbrand et al, 2001).

Postnatal depression has also been shown to have a negative effect on women's relationships with their partners, other family members and the new baby (Hoffbrand et al, 2001). This is particularly significant when viewed in the context of the growing body of evidence that suggests spousal support is linked with fewer depressive symptoms and less stress, and these benefits are most significant when the baby is recognised as 'temperamentally difficult' (Thorp et al,

2004). Depressed mothers are less sensitively attuned to their infants, less affirming and more negative in describing their infant. These disturbances in mother–infant interaction were predictive of reduced infant cognitive outcomes at 18 months and seven years of age (Swain, 2011). Research also suggests the consequences of having a mother suffering with long-term depression can be serious for infants' emotional development and social behaviour, which have also been shown to be adversely affected (Field, 2010; Belsky and De Haan, 2011; Hoffbrand et al, 2001). More recent evidence has highlighted that postnatal depression can lead to later problems for the child, including increased depression among children of depressed mothers in adolescence (Murray, 2011).

My Time My Space is an innovative approach to the treatment of postnatal depression, using creativity in a group setting. Post-course evaluations have shown positive outcomes with a reduction in postnatal depression and reduced social isolation.

Study aim

The aim of My Time My Space is to reduce postnatal depression by providing a supportive, relaxed and creative environment for women experiencing postnatal depression/anxiety.

Method

My Time My Space is delivered as a weekly group session for up to 10 women identified with postnatal depression/anxiety. Women can be referred by their health visitor, GP or family support worker. The sessions normally run for about 10 weeks and are co-facilitated by a socially engaged artist, children's centre family support worker and health visitor. Each discipline contributes skills from their individual area of expertise, which complement each other. Each session is two hours long and a sponsored crèche is available to allow women to focus on themselves and

provide a break from childcare. During the session the artist leads a creative activity and the health visitor and family support worker take part in the experience 'alongside' the participants. The health visitor is available throughout the session to offer guidance and support on parenting, motherhood and any other issues that may arise. The session is designed to be informal with a conversational style, which enables women to contribute as much as they feel able. A professionally-run crèche is provided, which is sensitive to the needs of mother and infant. Parents value this as it facilitates their attendance and is vital to offering the time and space to allow growth and develop confidence by and in both parties.

The artist works alongside the mothers using an expanded repertoire of artistic methods and materials, including paint, fabrics, collage, jewellery, silk painting and sculpting materials. The aim is to support the mothers to engage in the artistic activity and to allow them time and space for personal and social reflection, development and progression. The artist's role is to introduce artistic techniques, to teach new skills and to build confidence.

The emphasis is on the process rather than prescribed end products, where the women can feel proud of what they have created and the skills they have learnt and developed. Once the course is running, many participants choose to create items for their baby. A good artist facilitator is crucial to the success of the project.

The health visitor is available throughout the session to offer guidance and support on parenting, motherhood and any other issues that may arise. This is mainly provided within the group but may also include some one-to-one discussions if needed. The session is designed to be informal with a conversational style, which enables women to contribute as much as they feel able. The group is not intended to offer counselling or psychological therapy, but rather to offer a 'safe space' where women can be supported by other women in a non-judgmental way.

The groups are run in a relaxed and fun atmosphere. There is lots of laughter and the fact that the health visitor takes part alongside the participants is important. During the activity the artist, health visitor and family support worker will endeavour to ensure all mothers feel included in the session and the conversation invariably explores social issues, creative learning processes and artistic production.

The most economically sustainable way to deliver My Time My Space is through collaboration between the children's centre, health visiting service and charitable sponsorship to cover the cost of the venue, crèche, artist and materials. Since the project's inception it has been funded by numerous successful applications to charities, ranging from the Arts Council to smaller-scale donations from organisations like the Lions Club and local churches. These demonstrate the 'Building Community Capacity' element of My Time My Space. This collaborative financing model makes it a cost-effective response for health visiting teams as only two health visiting hours are required each week to support up to 10 mothers with postnatal depression. This is a reduction on the hours required for a 'listening visit', which typically requires one health visiting hour per week for each mother.

The results have been collected from participants' views expressed in post-course evaluation forms with open questions to generate qualitative data over the past two years and a more focused pilot study of eight women, which also included pre- and post-group Edinburgh Postnatal Depression Scale scores (EPDS).

Results

The results of the post-course evaluation forms indicate that My Time My Space is viewed positively by women and postnatal depression is reduced. The pilot study results found a reduction in EPDS scores; the mean pre-group EPDS score was 17.3 and the post-group score was 11.1, which was a mean reduction of 6.2 ($n=8$). Although these numbers are small, the qualitative results collated since 2004 suggest women felt that attending My Time My Space reduced their depression. This is also evidenced by the attendance figures each week, which have consistently been better than anticipated for this hard-to-reach group. In the pilot study seven out of eight participants attended five or more sessions out of six offered.

Interestingly, one of the participant's EPDS scores increased from a pre-group score of 8 to a post group score of 14. However, the discussion within the group with this mother revealed how she had initially found it too difficult to accept a diagnosis of postnatal depression. She felt a pressure to be a 'perfect mother' and would become quite upset if healthcare professionals

suggested she might be depressed. Her health visitor used her professional judgement to refer her to My Time My Space as she was becoming increasingly anxious, low in mood and socially isolated. During the sessions this mother expressed how she enjoyed the opportunity to 'be real' that the group provided. Her post-group score reflects a more accurate assessment of her mood, which she reported had improved during her attendance at My Time My Space.

The qualitative findings from the post-course evaluation forms from this pilot project, as well as other projects run in the south-west area of England can be grouped into emerging themes.

When asked 'What part of My Time My Space did you find most helpful?'

Social support

Many participants described how postnatal depression had made social integration difficult and they valued the opportunity to get out of the house and meet people. They described how they had made new friends and this had a positive effect on their mood.

'I wouldn't have gone to any other groups. I've made new friends.'

'Making me motivated to come out of the house and meet people.'

Within this theme some participants also described an additional dimension of social support that came from being with other women who had postnatal depression and were experiencing similar issues:

'There are people who are similar to you to listen, to express, I feel more relaxed, secure and supported.'

'What I like about the group is that we are all here for similar reasons so I feel I am not going to be judged. I can relate and chat to people, it's more relaxed.'

Participants' perception of improved mental wellbeing

Participants described how they felt their mental wellbeing had improved as a result of attending My Time My Space. This is best illustrated in the following quotes:

'I go to psychotherapy and I don't say a word, but in nine weeks of My Time My Space

I've said more than in 18 months of psychotherapy.'

'I was having panic attacks and I wouldn't leave the house. I have enjoyed it so much each time. All these people have come to be friends. It's helped me to understand how I feel.'

'I self-harm a lot and haven't for a long time. I just pick up a pen and book now.'

'My husband said it helped me come out of myself and build me up.'

'Having (HV) and (family support worker) around helped me keep perspective.'

Participants' perception of improved parenting capacity

Participants described how they felt more confident in their abilities to parent their children. This confidence was derived from time away from their child to reflect on their issues, a more realistic perception of 'good enough' parenting and an opportunity to focus on their own needs.

'Everybody in our family benefits from My Time My Space. From it the boys are happier because when they were younger I was sad. Now my confidence is pretty sky high and I am a much stronger person.'

'I'll enjoy my time with my child now rather than worrying all the time if I'm a good enough mum.'

'Spending a bit of time away from my baby, albeit a short time, makes me a better mum.'

The benefits of creativity

Participants described how they enjoyed the opportunity to spend time engaging in the arts-based activity and being creative, which resulted in pleasing end products:

'The art work was great, I haven't been creative since school, so I really enjoyed being able to create some cool stuff for the kids.'

'Being able to use my hands again, there's just no time to be creative with a baby.'

'I was worried I had to be arty, but it wasn't like that at all, I found I could just be myself.'

'For me it has been an inspiration, a journey of re-discovery.'

'The group was led at a pace that was great for everyone. Everything was quite free and easy so that I never felt pushed or stressed and yet well organised so that I was never bored or confused.'

Their success at art within the group inspired some women to reengage in the workplace:

'I would definitely recommend this group to anyone and I know that everyone whom I attended with would say the same thing. Now that the group is finished I feel much happier, contented and confident. As a direct result of the group I managed to even secure a job in design and I feel so much more relaxed and at ease.'

When asked 'How could My Time My Space be improved?' most participants left this blank or wrote something like 'It's great the way it is.' Some participants asked if the group could be longer than 10 weeks and this is being addressed in some areas by providing a follow-on group called 'Out of the Blue'. In other areas the participants are encouraged to collectively join an existing children's centre mother and baby group, and the transition appears to be easier when supported by the other participants.

Limitations

The findings reported in this paper are a collation of post-group evaluation forms and a small pilot study using pre- and post-Edinburgh Postnatal Depression Scores, in addition to the qualitative evaluation forms. The findings suggest My Time My Space has a positive effect on women's mood and perceived social support. More rigorous research based on quantitative and qualitative scientific enquiry is needed to substantiate these initial findings. As health visiting research is beginning to focus more on evidence-based outcomes of intervention, it would also be useful to explore the effects of My Time My Space on mother-infant attachment, parenting capacity and the long-term benefits of My Time My Space using a longitudinal method.

Discussion/conclusion

The collated results from post-course evaluations suggest My Time My Space is an effective alternative or additional method of treatment for postnatal depression. This is

probably most clearly evidenced using a short case study of a recent participant (Mother A) at My Time My Space.

Case study

Mother A arrived at the first session and had a panic attack. Her EPDS score was 27, which suggests she had severe postnatal depression. Everything inside her was telling her to get out and go home. The health visitor allowed Mother A time and space to talk about how she felt and encouraged her by saying that she was really encouraged by the fact that she had got in her car and driven down to the centre, which must have taken a lot of courage. She suggested although there was a large part of her that wanted to leave, it was her feeling there was a small part of her that really wanted to stay. She suggested that she just sit on the sofa and have a coffee with no pressure to participate (the sessions were generally well nourished with homemade cakes, pots of tea and cafetieres of fresh coffee). Gradually, other participants came over and started to chat in a non-judgemental way and Mother A started to relax and stayed for the duration of the first session. The health visitor liaised with Mother A's GP who was happy for her to continue attending the group. Mother A attended the group every week and never missed a session, and on her evaluation she wrote how helpful she had found it:

'I have made friends and it has helped me through some of my darkest moments. I will miss it' [she drew a sad face].

This provides a poignant illustration of the effects of postnatal depression for this mother. Her EPDS score had dropped from 27 to 19, but her comments told us so much more about the benefits of My Time My Space. A health visitor described My Time My Space as 'truly transformative. This is a multi-faceted approach that meets the needs of women socially, creatively and psychologically'.

This multi-faceted approach is echoed by a mother who wrote:

'There is a supportive artist who inspires you, there's a health visitor to support you and there are people who are similar to you to listen, to express. And there's time. But all of it added up together becomes more than that. A lot more than that.'

Key points

- Postnatal depression affects 10%–15% of women having a baby; however, many receive no treatment
- My Time My Space is an arts-based group for women with postnatal depression that aims to improve mood by reducing social isolation and using creativity to improve self-esteem
- The qualitative findings suggest My Time My Space has a positive effect on women's feelings of mental wellbeing, perceived social support and perceived parenting capacity. Participants also described benefits of creativity
- The findings from a small quantitative pilot study within this paper are limited by the sample size; however, they suggest My Time My Space contributed to a reduction in depression using the Edinburgh Postnatal Depression Scale

The findings are based on an approach that has been piloted and developed since 2004 as a highly successful model of collaborative working between Creativity Works – a creative community development charity, health visiting and children's centres in the south west of England. The team are continually reflecting on their model of provision and are also in the embryonic stage of developing an 'Our Time Our Space' group for women and babies using creativity to improve maternal attachment and early communication.

Sharing expertise

If you are interested in developing a My Time My Space group in your area please contact Creativity Works, which specialises in supporting the delivery of creative projects within communities. As a charitable

organisation, it can provide resources, training events and is happy to chat to you by phone. It can help train an artist you may already have in mind or recruit the right artist. Contact: www.creativityworksforeveryone.co.uk Tel: 01761 438852.

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