

**Host department: Bristol**

**Project Title:**

**Optimising community pharmacy's role in supporting the mental health needs of parents during the postnatal period**

**Proposed supervisory team:**

**Katrina Turner**, Professor of Primary Care Research, Bristol University. Qualitative methodologist with expertise in mental health research, intervention development and evaluation.

**Ian Maidment**, Professor of Clinical Pharmacy, Aston University. Expertise includes community pharmacy, including community pharmacy interventions and qualitative methods.

**Tom Kingstone**, Lecturer in Mental Health and Wellbeing, Keele University. Expertise in exploratory mental health research, qualitative methods and patient and public involvement.

**Potential for cross consortium networking and educational opportunities:**

All three supervisors are members of the Society for Academic Primary Care (SAPC)'s Mental Health Special Interest Group (SIG), which is co-led by Professor Turner with Professor Chew-Graham (GP and Professor of General Practice Research, Keele University) who will act as an advisor on the study due to her expertise in perinatal anxiety and depression. The student will be encouraged to join the SIG, which meets quarterly online and includes over 40 members from across the UK. In addition, members of the supervisory team are already working together on studies in the area of perinatal mental health, which involve colleagues from across the SPCR (e.g. SPCR funded study Classification and outcomes of perinatal anxiety: implications for practice). The student will have opportunities to attend project meetings, dissemination events, and to talk to other members of the research team. The student will also join Professor Maidment's Pharmacy and Medication Optimisation Research Group and have support from the wider team that includes PhD students, research fellows and post-docs. The student will be invited to regularly present their work to this group. Professor Maidment also has strong links with pharmacy organisations regionally and nationally [e.g. PSNC (Pharmaceutical Services Negotiating Committee), RPS (Royal Pharmaceutical Society), NPA (National Pharmacy Association)] to support the research in terms of recruitment, dissemination and impact.

**Project description:**

**Background**

Many parents, particularly new parents, struggle during the postnatal period, i.e. the first 12 months following the birth of a child. The NHS report that 1 in 10 women suffer from postnatal depression, and 24-50% of fathers whose partners have depression, experience depression themselves. As importantly, there is a much larger group who, whilst not diagnosed with depression, struggle to cope mentally and emotionally with the demands and challenges of parenting a newborn.

During the postnatal period parents may consult their GP, community midwife and health visitor, and evidence suggests that early intervention can decrease an individual's risk of developing more serious mental health problems. However, some parents may be hesitant to seek professional advice due to the stigma surrounding poor mental health and society's pressure to be the "perfect parent". Furthermore, fathers may be excluded

from discussions, as health visitor or midwife appointments often focus only on the needs of the mother and child, and because fathers may avoid questions about themselves as they prioritise the needs of others.

Community pharmacists and counter assistants might be in a particularly good position to identify and support parents who are struggling mentally. Over 1.6 million people visit a community pharmacy every day and, due to the increasing use of remote consultations in general practice, for many individuals attending a community pharmacy will be their most frequent in-person healthcare interaction. In addition, interacting with individuals buying nappies, formula milk, Calpol® etc, and seeking advice on issues such as nappy rash, could provide opportunities for pharmacists to initiate discussions with parents about how they are feeling.

Currently, we know very little about the support community pharmacy give parents, but the limited research that has been done indicates that pharmacists view themselves as having a significant role in recognising postnatal depression, although they experience barriers to service provision that include inter-professional role boundaries, and a lack of clear referral systems and adequate training in mental health. Therefore, we need to better understand their current role in providing mental health support to parents, and consider how it could be expanded and better integrated across primary care services.

### ***Aims and objectives***

The aim of the study is to understand how community pharmacy staff can best support the mental health needs of parents during the postnatal period. Specific study objectives are to:

- Review existing evidence on community pharmacy support during the postnatal period
- Explore community pharmacists, counter assistants and other primary care practitioners' (GPs, midwives, health visitors, practice nurses) views on the current and potential role of pharmacists in supporting parents
- Assess parents' views on the role of pharmacy staff, and what types of support and intervention they would view as potentially beneficial to them
- Identify and outline interventions that could increase the capacity of pharmacy staff to identify and manage parents during the postnatal period

### ***Methods***

- Systematic review of relevant literature including the grey literature and pharmacy literature (which often is not MEDLINE listed)
- In-depth interviews with community pharmacists, counter assistants and other primary care practitioners
- Focus groups and interviews with parents who self-identify as struggling to cope mentally, including those who have been diagnosed with postnatal depression and/or anxiety, and have a child under the age of 1 year, purposefully targeting first-time mothers and fathers
- Outline potential pharmacy-led interventions targeting parents struggling to cope, including those with postnatal depression and anxiety

### ***Impact***

Findings will address current gaps in knowledge and inform the design of pharmacist-led interventions to support parents. These interventions would be further developed and evaluated in future studies.

### Training and development provision by host:

**Formal training:** Bespoke according to the student's needs, but courses could include Bristol Medical School internationally renowned research methodology short courses in: an introduction to qualitative research methods (5 days), introduction to research governance (2 days), introduction to systematic reviews and meta-analysis (4 days), writing a journal article (3 days) and writing a qualitative paper (1 day). The student would also be encouraged to attend 'development courses' run by Bristol University and as part of NIHR ARC West's training and capacity building programme.

**Informal training:** The student will be based in the Centre of Academic Primary Care (CAPC), at the University of Bristol, which is one of the largest centres for primary care research in the UK. CAPC is based within the Bristol Medical School and has strong links with the Bristol Biomedical Research Centre (BRC) (<https://www.bristolbrc.nihr.ac.uk/>), Applied Research Collaboration (ARC) West (<https://arc-w.nihr.ac.uk/about-arc-west/>) and the NIHR Health Protection Research Unit (HPRU) (<https://www.bristol.ac.uk/population-health-sciences/centres/nihr-hpru/>). The student will have opportunities to attend and present at CAPC meetings, attend School seminars, and meet with colleagues working in the wider medical school and within BRC, ARC West and HPRU. They will have fortnightly supervision and will receive career advice, mentoring and support. They will be supported in submitting abstracts and attending relevant primary care conferences.

**PPIE:** We will establish a PPIE group specifically for this study. Members will be invited to comment on each phase of the research, all patient-facing materials, and the content of topic guides. They will also be involved in analysis and interpretation of data, dissemination plans, and invited to co-present at conferences. The student will be supported by CAPC's own PPIE advisors, and have access to all the training and PPIE materials they provide.