

BACKGROUND & SIGNIFICANCE

Mothers, especially from ethnic minorities in London face healthcare disparities, resulting in increased delayed goals of care and associated distress (Harrison 2024, 2023). Postpartum depression (PPD) is a global health concern due its well-known devastating effects on infants, children, and family outcomes (Slomian et al., 2019).

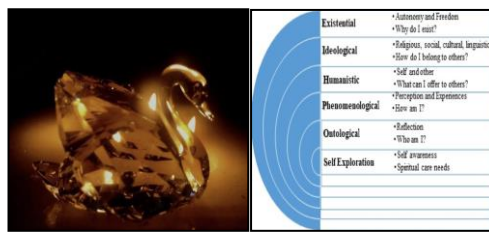
Globally, 17.2% of women suffer from postpartum depression (Wang et al., 2021), characterized by symptoms such as dysphoria, emotional fluctuations, insomnia, confusion, anxiety, feelings of guilt, and suicidal thoughts (Pearlstein et al., 2009).

Only, 7% of women with maternal mental health symptoms get referred for specialist support in the UK (Harrison 2024, Royal College of Obstetricians and Gynaecologists, 2017). Early intervention support during this time can have long-lasting effects on maternal mental health, infant development, and family dynamics.

AIM AND SCOPE

- 1) To determine the extent of self-perceived trauma, resilience, and subjective wellbeing among vulnerable and marginalised post-natal mothers, in East London (SDG -3 Good Health and Wellbeing; SDG-5: Gender Equality).
- 2) To identify associated factors contributing to post-natal depression, anxiety, resilience, and subjective wellbeing in the target population (SDG- 10: Reduced inequalities; SDG-11: Sustainable cities and Communities).
- 3) To evaluate the effectiveness of a self-reflective wellness intervention tool in promoting fostering resilience and subjective wellbeing through existential advocacy and test the effectiveness of SOPHIE in preventing postpartum depression and anxiety. (SDG-3: Good Health and Wellbeing).

SOPHIE (Ali, 2017)- is a reflective framework fostering resilience and self-healing through existential advocacy, using art and narrative inquiry to promote maternal wellbeing. This tool has been found effective in trauma recovery and healing among healthcare students in two educational settings in the United Kingdom and on palliative care nurses in US (WINGS grant project with Purdue University 2021-2023).



METHOD

Mothers who had given birth in the last three years and were residents of east London were invited to participate in the study at a local University campus for four weeks. Art interventions and narrative enquiry methods were used to facilitate reflection and creative self-expressions for four weeks.

A mixed-method pilot study using pre and post-one group intervention design.

Quantitative: The Brief Resiliency Scale (BRS) (Smith et al; 2008), Edinburgh Postnatal Depression Scale (EPD) Cox et al; 1987), Generalized Anxiety Disorder Screener (GAD-7) (Spitzer et al: 2006).

Qualitative: The SOPHIE framework and Art interventions were used to facilitate self-reflection and meaning-making followed by a focus group study.

Phase One:

Accessing Self: Who am I

Narrative activity:

1. Practicing Mindfulness using Pebbles
2. Artwork- Collage on Identity: Who Am I

Phase Two:

Engaging with Self: How am I?

Narrative activity:

1. Birthing Narratives Using an Object
2. Inside Outside Masks for Emotions:

Phase Three:

Embracing Self: Why am I?

Narrative activity:

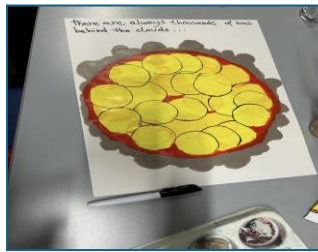
1. Mandala Painting with Music
2. Practicing mindfulness using Flowers and leaves



SWAN- Self-healing and Wellbeing Interventions through Existential Advocacy and Narrative Inquiry- Applying SOPHIE as a practice methodology

A pilot study to promote maternal mental health in East London- EDUCOM Seed Funding, 2024.

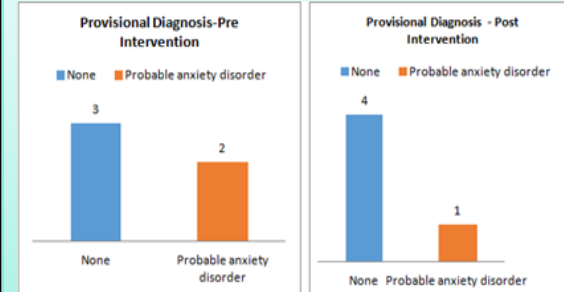
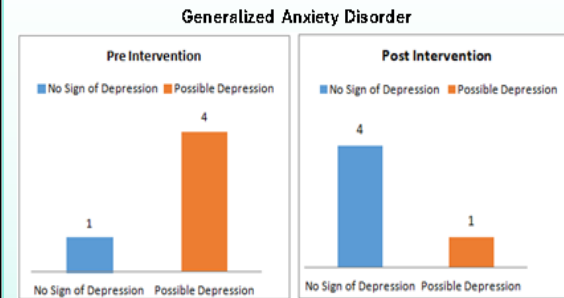
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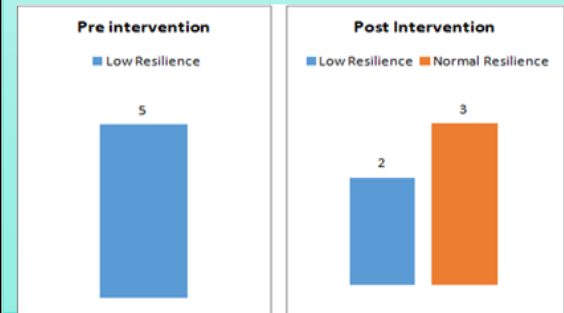
QUANTITATIVE ANALYSIS

COMPARISON BETWEEN PRE-INTERVENTION AND POST INTERVENTION RESULTS USING GAD, EPDS AND BRS SCALE

Edinburg Postnatal Depression Scale



Brief Resilience Scale



FINDINGS

The study initially included 11 participants in the pre-survey phase, but only 5 (45.5%) participants completed all four weeks of the study phases.

Anxiety was reported by 18-36% of the sample, ranging from sometimes to often. In the post-survey phase, only 5 participants completed the post-test phase, indicating a 54% attrition rate. Among these, 1 out of 5 participants (20%) had possible depression, while 3 participants (60%) showed no signs of depression at the post-test phase. Twenty percent (20%) of the participants had a probable anxiety disorder at the pre-test phase however, one of the participants who completed the study reported no signs of anxiety. Three participants (60%) had low resilience during pre-intervention, however, after 4 weeks of intervention they reported normal resilience.

SOPHIE as a reflective framework with art workshops facilitated a deeper exploration on several existential and spiritual care aspects including: Vulnerability and loss, Incongruent self-image, Trust and Hope, Guilt and Shame, and Authenticity and Autonomy. Art-based activities allowed participants to acknowledge their self-care needs and articulate meaning-making and effective coping in their own unique ways through creative expressions. The study revealed disparities in access to healthcare services and social support, and a need to inform policies and programs.

RECOMMENDATIONS

Recognising the prevalence of psychological trauma and stress-related disorders among marginalised communities, the study underscores the importance of addressing psychological distress and promoting existential well-being to prevent dysfunctional coping mechanisms and enhance maternal and neonatal health. More studies are needed to further evaluate the effectiveness of the intervention among postnatal mothers and young families across East London.

REFERENCES

Ali, G. (2017) Multiple case studies exploring integration of spirituality in undergraduate nursing education in England [Unpublished doctoral dissertation]. University of Huddersfield. <http://eprints.hud.ac.uk/eprint34129/>

Cox, J.L., Holden, J.M., and Sagovsky, R. (1987). Detection of postnatal depression: Development of the 10-item Edinburgh Postnatal Depression Scale. *British Journal of Psychiatry* 150(7):96.

Harrison, S., Quigley, M. A., Fellmeth, G., Stein, A., Ayres, S., & Alderdice, F. (2024). The impact of the Covid-19 pandemic on postnatal anxiety and postpartum stress: Analysis of two population-based national maternity surveys in England. *Journal of Affective Disorders*, 356, 122-136.

Harrison, S., Pilkington, V., Li, Y. et al. Disparities in who is asked about their perinatal mental health: an analysis of cross-sectional data from consecutive national maternity surveys. *BMC Pregnancy Childbirth* 23, 263 (2023). <https://doi.org/10.1186/s12884-023-02524-2>

Royal College of Obstetricians and Gynaecologists (2017) *Maternal Mental Health – Women's Voices*. London: Welsh Publishing.

Smith, B.W., Dalen, J., Wiggins, K., Tooley, E., Christopher, P. and Bernard, J. (2008). The Brief Resilience Scale: Assessing the Ability to Bounce Back. *International Journal of Behavioral Medicine*, 15, 194-200

Spitzer, R. L., Kroenke, K., Williams, J. B., & Löwe, B. (2006) A brief measure for assessing generalized anxiety disorder: the GAD

Slomian, J., Horvo, G., Emons, P., Register, J.-Y., & Bneyt, O. (2019). Consequences of maternal postpartum depression: A systematic review of maternal and infant outcomes. *Women's Health*, 15, 174558615848484. <https://doi.org/10.1177/1745586158484844>

Wang, Z., Liu, J., Shuai, H., Cai, Z., Fu, X., Liu, Y., Xiao, X., Zhang, W., Karabodam, E., Liu, S., Liu, Z., Li, Z., & Yang, B. X. (2021). Mapping global prevalence of depression among postpartum women. *Translational Psychiatry*, 11(1). Article 1. <https://doi.org/10.1038/s41398-021-01644-4>