

Centering Lived Experiences of Maternal Mental Health in shaping Responsive Health Systems in Ghana

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Key Messages

- The lived experienced of maternal mental health clients serve to amplify the voices of vulnerable groups.
- A qualitative realist analysis using the ecology of birth theoretical framework unravels the complex interplay of contextual factors influencing maternal mental health conditions.
- A holistic and integrated person-centred maternal mental health service approach can ensure that health systems are truly inclusive and responsive to maternal mental health needs.

Introduction

- Maternal mental health is a neglected health systems priority in Ghana. Although research suggests that 41% of pregnant and 50% of postnatal women experience a mental health condition, commonly linked with hormonal changes in pregnancy.
- Usually, the psycho-social and spiritual aspects of mental health are often overlooked, and under-resourced care relies predominantly on biomedical approaches.

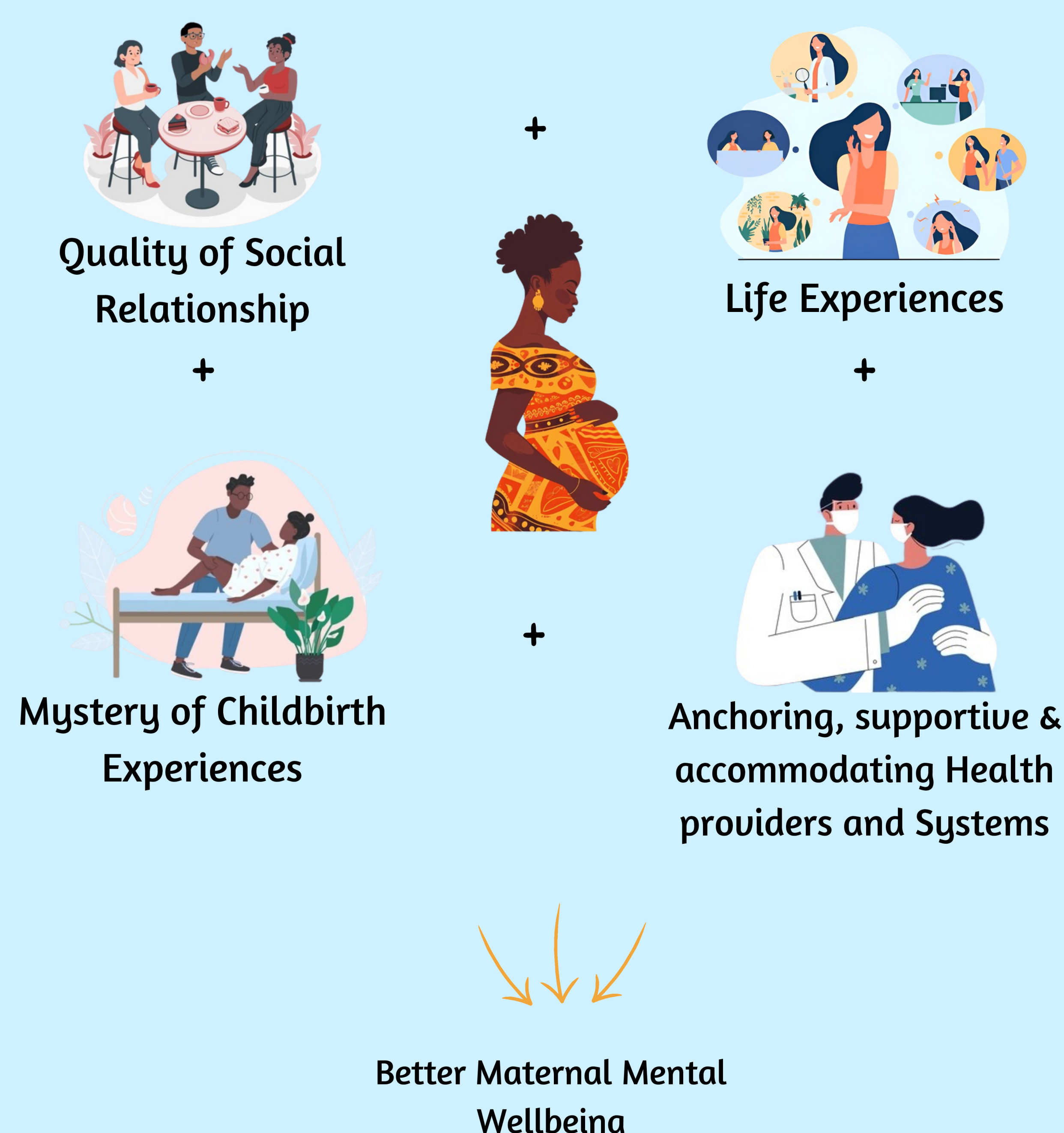
Methods

- Realist evaluation approach, guided by the programme theory (in box 1 below) was employed.
- 18 FGDs with maternal health clients without mental health conditions (n=117) and those with mental health conditions (n=10)
- 6 in-depth interviews with maternal clients with mental health conditions (n=4) and some relatives of these clients (n=2)
- Data was analysed retroductively*, using CMOs heuristic

Programme Theory

In a socio-cultural context where mental health issues during pregnancy are viewed spiritually, healthcare is pluralistic, and the health system recognizes both biomedical and psycho-social factors, a theory is proposed. If the formal health system better understands and accommodates people's perspectives on mental health, then trust in maternal mental health services will increase. This would lead to more pregnant women using these services, ultimately making the health system more responsive to their mental health needs.

Results



This quote below illustrates an anchoring healthcare staff who supported a pregnant woman through the provision of tailored need 'care':

"During my pregnancy, my husband took to his heels and family members did not also support me.One of the midwives informed our district MP on his birthday. She had explained my financial situation to him... The midwife's intervention made the MP help me financially throughout my pregnancy..."

(Postnatal woman with mental health condition, FGD)



* However, alternative health care providers (e.g: faith healers, etc), despite being considered unsafe nor benevolent, related better with maternal health clients than the formal health care provider

Discussion & Conclusion

The lived experienced of maternal mental health clients serve to amplify the voices of vulnerable groups, advocating for inclusion of their needs and expectations into the formal healthcare system. A holistic and integrated person-centred maternal mental health service approach can ensure that health systems are truly inclusive and responsive to maternal mental health needs.

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