

DO WE NEED A NATIONAL STRATEGY?

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Lack specialist services

- Sept 2008 law change to allow mothers to have babies with them in jail for up to 2 years
- Increase from 3 months
- Can women with mental illness be given the same compassion and understanding?
- There are no psychiatric inpatient mother and baby beds in the North Island
- Three months mean length stay

Adequate?



"I know nothing about the subject,
but I'm happy to give you my expert opinion."

Treatment of pregnancy related complications

- Cardiac conditions
- Diabetes
- Would these conditions be treated without ability to refer to a specialist team?

Disruption of attachment

- Mother-infant bond
- Attachment relationship disrupted
- Long term consequences for infant
- Specific mother infant therapy needed
- MBU provides suitable environment
- Traumatic for partner and family

STRATEGY

National guidelines

Minimum standards

Strategy would include

- Training and education
- Identification of women at risk of relapse from serious mental illness
- Pathways of referral after identification

Range of services required

- Perinatal services in each centre
- Hub and spoke model
- Psychiatrists in bigger centres
- Mother/baby units in North Island
- Need to interface with infant services

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“I hear you worked so many hours you passed out for 20 minutes. I just thought I’d make it clear that I’m not paying you for those 20 minutes.”

4.5 Perinatal psychiatrists in NZ

Considerable combined experience

Need to have input into

guidelines



good friends
are like stars.

you don't always see them,
but you know they're always there

(old saying)