



The SMARThealth Perinatal Mental Health (PRAMH) Study: Improving women's perinatal mental health in rural communities in India – August 2024

FACTS:

- Suicide is a leading cause of death for women of child-bearing age in low and middle-income countries (LMICs).
- In a study from South India, 7.6% of mothers in early pregnancy (less than 20 weeks) experienced suicidal thoughts.
- The prevalence of common mental disorders, such as anxiety and depression, during the perinatal phase is 15~20% in LMICs.
- Very little research exists on how to support women in the perinatal period in their communities in rural India.

PROJECT CYCLE:

2024–2025

PARTNERS:

The George Institute, India
University of Oxford

SUPPORTERS:

The George Institute for Global Health
Medical Research Council (MRC) Public Health Intervention Development (PHIND) grant, UK.
University of Oxford, Improving Equitable Access to Healthcare Pump Priming grant, UK

PRINCIPAL INVESTIGATOR:

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BACKGROUND:

- During the perinatal period, women often face mental health challenges, ranging from mild and temporary psychological distress, to chronic, progressive and severely disabling conditions.
- Participatory community interventions ('task shifting') are promising approaches to improving common perinatal mental health disorders (CPMDs) in rural India. Support groups led by women of the same community with relevant experiences, or community health workers, have been shown to be acceptable and effective.
- In the PRAMH study, we are developing a peer-led low-intensity psychological intervention based on World Health Organization (WHO) mental health programs, tailored for non-specialist health workers in LMICs.

AIM:

- To understand the local context of perinatal mental health and collaboratively develop a complex, community-based intervention with community members and key stakeholders to improve women's mental health in the perinatal phase in rural and semi-rural districts of Haryana and Telangana in India.

METHODS:

- We will work in close partnership with women with lived experience of CPMDs, families, local communities and key stakeholders, such as policy and non-governmental organisations to develop the four PRAMH components:
 1. Designing a novel digital screening tool to identify rural women at risk of CPMDs.
 2. Developing a peer group-led intervention to support women during pregnancy and after birth.
 3. Building a network and approach to integrate perinatal mental health and its social determinants.
 4. Developing a community-based campaign to address stigma and discrimination around perinatal mental health.

IMPACT

- PRAMH will lead to the development of a functional and tested digital screening tool for perinatal mental disorders and a community-based peer-group intervention for perinatal mental health.
- If proven acceptable and feasible, PRAMH will be evaluated in a larger scale trial, potentially providing crucial support for women experiencing perinatal mental health challenges in rural communities in India, South Asia, and beyond.

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