

The Gatehouse Centre Hareclive Road Bristol, BS13 9JN support@mothersformothers.co.uk

Charity Commission No: 1185281 Company House: 08764052

Equality Impact Assessment: Reach



Representation Matters

Background

About the Reach service

Mothers for Mothers' Reach service comprises a helpline, regular support telephone calls, and online support for women and birthing people affected by perinatal mental illness. Reach provides an equitable service across all of Bristol, North Somerset and South Gloucestershire.







The helpline provides immediate support to women and birthing people, as well as to their partners, family members, friends, health professionals, and anyone directly affected. Support calls offer mothers a regular weekly call or text. This a confidential listening and planning service exclusively for women and birthing people suffering from a perinatal mental illness. Online support is also provided to mothers only via social media direct messaging, email, and moderated discussion on a closed Facebook group.

In 2023/24:

3061 helpline calls received6407 support calls made9382 text or direct messages

The Reach service is the first point of access for all Mothers for Mothers' services, including home visits, antenatal groups, peer support groups, art psychotherapy and counselling, and Special Needs and Disabilities (SEND) support for mothers who have children with SEND or who have SEND themselves. Reach staff and volunteers also support mothers to engage with other services such as NHS mental and physical health care, social services, domestic abuse services, diagnostic assessments for autism and/or ADHD, food banks and baby banks, and housing support.

Reach support calls also provide wraparound care for mothers who are on waiting lists for perinatal mental health interventions across the range of NHS and VCSE services in BNSSG. This ensures that these mothers are not left without support at this crucial time, and that they are monitored for signs that their mental health may be worsening. Similarly, Reach provides aftercare once mothers have been discharged from services, ensuring a smooth transition and preventing relapse.

"Making that call on the helpline that day changed everything for me. It felt like my last hope. I had no idea where to go for support."

"Everything felt so out of reach, so to be able to talk to someone without a lengthy referral process or jumping through hoops was a welcome relief. After some time of receiving support calls, I engaged with art psychotherapy. This was something completely unreachable before due to financial pressures (childcare costs, working part time, recent maternity leave)."

"During my support calls, I was held gently and securely through the most turbulent time of my life."

About this assessment

This assessment was completed by consultant Dr Laura Richmond on behalf of Mothers for Mothers. It was prepared according to guidance on the UK government website and considers all relevant protected characteristics as defined by the Equality Act (2010).¹

The following data was utilised:

- ❖ Mothers for Mothers' client survey data for 2021/22, 2022/23 and 2023/24
- Feedback and case studies from clients for 2021/22, 2022/23 and 2023/24

¹ See GOV.UK 'Equality: Guidance and Regulation' (https://www.gov.uk/society-and-culture/equality).







- Client demographic data for 2022/23 and 2023/24
- Summary of staff and trustee equity, diversity and inclusion survey data (2024)
- Feedback from volunteers for 2021/22, 2022/23 and 2023/24
- Feedback from staff and trustees for 2021/22, 2022/23 and 2023/24
- Client Charter
- Action Against Racism Charter
- Equity, Equality, Diversity, Inclusion and Belonging Policy
- ❖ Anti-Racism Task and Finish Group Terms of Reference
- Anti-Racism Task and Finish Group Minutes for May and June 2024

Assessment

Protected characteristic	Impact	Evidence
Race	Positive impact. Reach provides support that is culturally competent and accessible to women for whom English is not their first language. This enables these women to benefit from Mothers for Mothers' other services and to access and navigate both statutory and VCSE services across BNSSG.	22% of Mothers for Mothers clients in 2023/24 told us they were from a black or minority ethnic background. This is significantly higher than across the local population: equivalent data for BNSSG in 2022 was 7% in South Gloucestershire, 3% in North Somerset, and 14% in Bristol city. ² Poor experiences of healthcare are more likely to be reported by minority ethnic groups. A Maternity Health Equity Audit across BNSSG (2022) showed that Black women had the poorest outcomes across all areas, including higher rates of prematurity, low birth weight, and neonatal intensive care admissions. ³ Mothers for Mothers actively develops and maintains cultural competency and an anti-racist ethos via its Action Against Racism Charter, Equity, Equality, Diversity, Inclusion and Belonging Policy, and an Anti-Racism Task and Finish Group which meets every two weeks. Mothers for Mothers' services are staffed by women from a wide range of ethnic backgrounds including Indian, Mixed British Caribbean, British East African, Black African, and White Welsh. One member of staff on the Reach helpline speaks fluent Hindi, Bengali and Gujarati which removes some language barriers for South Asian women. Mothers are asked on referral if English

 $^{^{\}rm 3}$ Healthier Together BNSSG, Our Future Health, September 2022.







² Healthier Together BNSSG, Our Future Health, September 2022.

is their first language and communication adjusted accordingly.

"Mothers for Mothers were alive to the fact that ethnic minority mothers are at a disadvantage in pregnancy, labour and beyond, and raised it as an issue of equality. I was signposted to research on this... MfM were aware and alive to this issue which is incredibly important. Because of these conversations I have reached out to other women of colour and found similar experiences. I wonder about the statistics and the collective experiences — I feel that this could be fed back to the trusts from the safe spaces created by Mothers for Mothers, where women feel able to talk honestly about their experiences."

"It's a lot for me to process and, being black, I have to fight for [my daughter] to have equal rights as her white counterparts. It's draining and she has so much potential.... Thank you for listening. I really appreciate your support."

"I am Albanian and struggled with the language barrier. [The Reach support worker] made me feel heard and listened to."

Marriage or civil partnership

Positive impact. A high proportion of Reach clients are single mothers, for whom the challenges of parenting are magnified. These women particularly need the accessibility that Reach offers, and benefit from Mothers for Mothers' expertise in this area.

Staff are trained in relationships and healthy conflict to support them to promote good marital relationships for clients and recognise 57% of clients in 2023/24 told us that they were single or separated from their partners. Equivalent data for the local population in BNSSG is not available, but nationally, in 2023 only 16% of families were lone-parent families.⁴

"My peer support worker has been encouraging and this has helped me be more open and better at communicating my feelings with my partner. That has really helped my relationships."







⁴ Office for National Statistics: Families and Households in the UK: 2023

	early indicators of domestic abuse.	
Disability	Positive impact. Not only does poor mental health in itself often constitute disability, Reach is the	15% of clients in 2023/24 told us that they had a disability in addition to their mental health needs. 44% of the staff team identify as having a disability.
	point of access for Mothers for Mothers' SEND support. This specialist service	Mothers are asked on referral if they have any accessibility needs and staff make relevant adjustments.
	empowers mothers of children with additional needs, or who are neurodivergent	"I have a debilitating disability; practical support was what I needed as well as emotional support. My home visitor was an all-rounder with support."
	themselves, to parent confidently and effectively, and to access and navigate	In 2023/24, 70% of clients surveyed about SEND support felt better able to access other services regarding the needs of their SEND child.
	other relevant services.	"Mothers for Mothers' SEND specialist helped me feel empowered to face this challenge when I felt hopeless. This gave me the strength I needed to support my child when she desperately needed it. I think without this support I wouldn't have had the resilience I have needed."
Pregnancy and maternity	Positive impact. Reach is a tailored specialist perinatal mental health service. Mothers for Mothers has significant	In Bristol alone, an estimated 500-800 women per year develop mild to moderate depression and/or anxiety in the perinatal period, while approximately 10-15 will develop serious perinatal mental illness. ⁵
	expertise in the specific access and support needs of mothers, and the	"The phone calls really helped as I could access them anywhere and didn't have to commit to being in a certain place with a new baby."
	unique challenges that they face. We have been supporting mothers locally for over 40 years, and our staff and volunteers	"It is essential that you exist. The knowledge GPs and health visitors have around maternal mental health is not there. You need a specialised service to deliver which is what Mothers for Mothers is doing."
	are all mothers with first-hand lived experience of perinatal illness.	

⁵ BNSSG Integrated Care Board and Bristol City Council, Bristol JSNA Health and Wellbeing Profile 2022/23.







Religion or belief	Positive impact. Working effectively with mothers from faith communities is a key aspect of Reach's cultural competence. Reach fosters strong local community links and helps mothers to connect with faith- based support.	In 2023/24, clients belonged to a range of faiths including Buddhism, Christianity, Judaism, Islam, and Sikhism. Staff are trained in engaging with the Islamic faith and maintain links with Muslim organisations. "I have felt strong enough to contact some support agencies that specifically help Muslim women, and I have reached out to an imam outside of Bristol to come and advocate on my behalf."
		Case study excerpt: Her religion has provided the client with much solace, and she was furthering her knowledge and understanding of its teachings Subjects of discussion included the effect of our hormones and monthly cycle on mental health with a consideration of practical alternatives to prayer during menstruation (yoga, mindfulness etc).
Sexual orientation	Positive impact. LGBTQIA+ parents face unique challenges and discrimination in maternity and early years settings. Compared to the proportion of parents nationally who are LGBTQIA+, an unusually high proportion of Reach clients identify in this way. This suggests that LGBTQIA+ mothers feel welcome and safe with us.	6% of clients in 2023/24 told us that they identified as LGBTQIA+. While data on sexual minority families in BNSSG is limited, nationally in the 2021 census only 3.2% of people identified in this way. This indicates that the proportion of parents is lower, perhaps significantly so as LGBTQIA+ people are less likely to become parents than their heterosexual peers. ⁶
Sex or gender	Positive impact. Reach is a tailored specialist service (see above). Mothers for Mothers has significant expertise in	Reach caters exclusively to mothers affected by perinatal mental health difficulties. Partners, carers and supporters may call if they are seeking support on a mother's behalf. This is reflected in the fact that, across our services, only 1.5% of clients in 2023/24 were male.

⁶ Office for National Statistics: Sexual Orientation, England and Wales: Census 2021 (https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/sexuality).







	the specific access	
	and support needs of	
	mothers, and the	
	unique challenges	
6 1	that they face.	
Gender	No known impact.	
reassignment		
Age	Positive impact. A	9% of clients in 2023/24 were young people
	high proportion of	under the age of 25. While data on maternal age
	Reach clients are	within BNSSG is limited, nationally the average of
	young mothers, for	a first-time mother in 2022 was 30.9. ⁷
	whom the challenges	
	of parenting are	Untreated and ongoing perinatal mental health
	magnified. These girls	issues have been shown to adversely affect child
	and women	health outcomes, an impact lasting into
	particularly need the	adulthood.8
	accessibility that	
	Reach offers, and	Case study excerpt: As a young mother battling
	benefit from Mothers	with judgement and disregard from society, the
	for Mothers' expertise	demands on the client's resilience were constant.
	in this area.	From the attitude of 'professionals' to the
		reactions of her family, the client was constantly
	Reach also improves	dealing with assumptions and negative feedback.
	outcomes for babies	We used our sessions as a counterpoint to these
	and children by	attitudes, pulling focus to the clear evidence of
	fostering maternal	the client's parenting skill, compassion,
	attachment, and by	intelligence and willpower.
	supporting mothers	intelligence and winpower.
	to engage with health	"I am a young mother at 19, very anxious to be
	services, pre-schools,	among many people, like groups or meet people
	and schools on their	that are not family. I feel judged that I had my
	children's behalf.	daughter at young age, and am isolated, with
		low self-esteem and a lack of confidence."
		"2
		"Getting better made me realise how much my
		child needs me and I've been able to put her
		needs first."
		<i>"</i>
		"I received lots of help with finding my son his
		preschool setting. My support caller made the
		connection for me. He is now settled and loving
		school."
Other -	Positive impact.	Within BNSSG, there is considerable local
deprivation	Reach provides	variation in socio-economic wellbeing, with
	practical as well as	significant areas of deprivation. In 2017, Bristol
	emotional support to	had 42 of the 10% most deprived areas in

⁷ Office for National Statistics: Birth Characteristics in England and Wales: 2022 (<a href="https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/livebirths/bulletins/birthsdeathsandmarriages/livebirths/bulletins/birthsdeathsandmarriages/livebirths/bulletins/birthsdeathsandmarriages/livebirths/bulletins/birthsdeathsandmarriages/livebirths/bulletins/birthsdeathsandmarriages/livebirths/bulletins/birthsdeathsandmarriages/livebirths/bulletins/birthsdeathsandmarriages/livebirths/bulletins/birthsdeathsandmarriages/livebirths/bulletins/birthsdeathsandmarriages/livebirths/bulletins/birthsdeathsandmarriages/livebirths/bulletins/birthsdeathsandmarriages/livebirths/births/birthsdeathsandmarriages/livebirths/births/births/births/births/births/births/births/births/births/births/births/births/births

⁸ BNSSG Integrated Care Board and Bristol City Council, Bristol JSNA Health and Wellbeing Profile 2022/23.







mothers facing multiple disadvantages, including poverty, homelessness, domestic abuse, refugee or migrant status and victims of trafficking. Reach also helps these women to engage with relevant statutory and other services to improve quality of life for them and their children.

England, including 26 in the most deprived 5% and six in the most deprived 1% in England.⁹

In 2023/24, 61% of clients resided in an area with an Index of Multiple Deprivation (IMD) score of 5 or below, while 16% were in an area with an IMD score of 1.

Mothers with multiple Adverse Childhood Experiences (ACEs), those living in poverty, and those experiencing domestic violence and migration, are all at increased risk of perinatal mental ill-health.¹⁰

Staff regularly attend training from other services to support intersecting needs. This also helps them to signpost to other services in an informed and effective manner.

"[The support worker] has encouraged me to contact the police [about ongoing domestic abuse] and to keep talking to them when necessary, to keep communicating and recording... I honestly don't know where I would be now without the support I have had from MfM."

Case study excerpt: We supported the client with her application for temporary accommodation through the Council and with her partner's status as a refugee (this was successful, and they moved), we referred the client to Womankind for therapy, referred the family to Incredible Kids (SEND support for her child), benefits were brought up to date (backdated money received, items from baby bank, sofa project etc were sourced). We then supported the family to get onto 'Home Choice' and to start bidding (antisocial issues - drug use, prostitution, etc - in and around the street where they were housed were an ongoing problem for the family and they needed to move). Supporting letters from Health Visitor, GP and school to help push up the process were collected. We also managed to arrange a holiday through the Family Holiday Association.

¹⁰ Public Health England, Mental Health and Wellbeing: JSNA Toolkit, 2019 (https://www.gov.uk/government/publications/better-mental-health-jsna-toolkit/4-perinatal-mental-health).







⁹ BNSSG Case for Change: Addressing the Health and Wellbeing Gap, 2017.

Case study: Before working with us, the client was living in a supported bedsit in Bristol with her daughter after she was trafficked to the UK. She was awaiting confirmation from the Home Office of her status as a refugee/asylum seeker and as a victim of sex trafficking... During lockdown and beyond we were able to access Baby Bank and foodbanks for her. We were also able to provide Christmas presents through the Salvation Army. We were able to support her to access help from her solicitor and bank when her anxieties and financial concerns increased... At the end of our work together, the client was granted leave to remain from the Home Office following their agreement that she had been a victim of trafficking and that she should receive asylum in the UK.

"I was dealing with two children, with one on the way. There was a lot going on with my physical health and mental health. I was trying to manage the kids in a flat and was worried about their mental health. I was also experiencing racial abuse."

"I had just given birth, baby was in NICU which was stressful in itself, and then we were made homeless. Baby had colic and we were given a room to live in, moving in at short notice."

Conclusion

The impact of Reach on minoritised and disadvantaged women and birthing people across BNSSG is significant. Over more than 40 years of supporting local mothers, Mothers for Mothers has developed singular expertise not only in the specific access needs of women and birthing people suffering perinatal mental illness, but also in supporting those from racialised and faith communities and those who face multiple intersecting disadvantages. It is unlikely that any other offer would be able to replace Reach effectively, at least not without taking years to become established and a detrimental impact on mothers occurring in the meantime.

As Reach is the only targeted service already providing equitable care across BNSSG, this report recommends that the considerations outlined above should be factored into the procurement process. Failure to do so risks significant harm to mothers who are already in difficult, and sometimes desperate, circumstances.

Dr Laura Richmond June 2024





