



IRIS *May*



Ireland 
Campaign

Maternal Mental Health Matters
Support moms. Support this cause!



What´s Iris May ?

Iris May (Originally Maio Furta-Cor) is a non-profit, democratic and non-partisan community campaign that aims to raise awareness among the population about the cause of maternal mental health.

It aims to carry out awareness actions throughout the month of May.

We seek partnerships to carry out actions throughout the month of May (and forward), a time when we celebrate Mother's Month in many countries and, here combined with the Maternal Mental Health Alliance we have the Maternal mental health awareness week Worldwide at this month.

The Campaign Colour and idea is Iridescent/Iris (Furta-Cor) that is a colour whose hue changes according to the light it receives, not having an absolute colour. In the maternity spectrum it is no different, all colours fit in it.



Iris May Campaign

We are more than **285 women** official representatives spread across Brazil and in more than **13 countries**, fighting for maternal mental health on multiple and diverse fronts, and innumeros of supporters.

The campaign has existed since 2020 and during this period we have already approved more than 50 Campaign laws, 3 of which are state laws (PR, SE, DF) in Brazil.

In **Ireland** we officially start the campaign in 2023, but since the foundation in 2020 we have been participating offering information, awareness, and support to the Brazilian community in Ireland (mothers and their peers).

In 2023 was our campaign launch and we could spread the importance of the cause to organizations, professionals, media channels, supporters, mothers and their peers, and the Brazilian Embassy in Dublin.



Irish Representative Iris May International Nucleus

Tree of Life Clinic is one of the Irish representative for the campaign . Here Leading are two **Mothers** and **Professionals** running their own businesses, along with the Maternal cause.

Caroene works with the mental health of mothers, children and families in Ireland and dreams big of prospering mental care wherever she goes.

Anelise provides maternal and child assistance and has an energy and vision that complements the cause.

"We believe that we can bring to Ireland an effective action that in Brazil is already highlighted in many agendas".



Anelise Amaral

**Mother and Child Consultant
Founder of Upa Slings**

Caroene Santos Murray

**Child Clinical Psychologist
Perinatal and Parental Psychologist
Founder of Tree of Life Clinic**

*Tree of Life
Clinic*
Psychology



Irish Representative Iris May International Nucleus

Lilian Fraga is one of the Irish representatives for the campaign, she works in maternal care connecting mothers and children through positive parenting. Lilian is based in Waterford

"It aims to carry out awareness actions throughout the month of May and promote actions and support networking all year around".

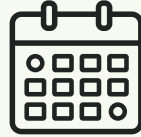


Lilian Fraga

**Maternal Care Professional
Positive Parenting Professional**



Why is an entire month dedicated to the cause of maternal mental health?



“We need a month dedicated to maternal mental health because there is a strong social stigma around issues related to mental health, even more when it extends to the maternal field. As a result, we are witnessing an alarming increase in cases of depression, anxiety, and unfortunately, suicide among mothers.

According to the World Health Organization (WHO, 2023), perinatal mental disorders are a serious public health problem and require urgent and effective coping strategies. When untreated, they are capable of devastating a woman's life, and consequently, their family's life as well.



Why is an entire month dedicated to the cause of maternal mental health?



“Perhaps also the answer lies in the 830 women who die every day from complications related to childbirth worldwide, 34 women per hour, one every two minutes, according to data from the Pan American Health Organization (PAHO) in 2021.

Maternal mortality is unacceptably high and occurs more in resource-poor settings and in remote areas. Black women die three times more. Young adolescent girls face a higher risk of complications and death as a result of pregnancy. And most of these deaths could have been prevented.”



¹ Pan American Health Organization
<https://www.paho.org/pt/node/63100>.



How the Campaign came about!

The Campaign was born from this **potent and unpretentious encounter of mothers and also maternal care professionals** at the door of their children's creche.

Nicole was the **restless mind** that came up with the idea of a colorful national campaign for maternal mental health. **Patrícia** was the **driving force** behind the cause, who believed in its potential and took it upon herself the challenge.

"We didn't know the proportion that everything would take, but we bet on the potential of that idea".

How the Campaign Logo came about!

In the **LOGO**, there is three fundamental elements for the campaign: *the bow, the pearl and the shell*.

The **bow** is a famous reference in awareness campaigns, born in the 1990s in the USA with the AIDS awareness campaign.

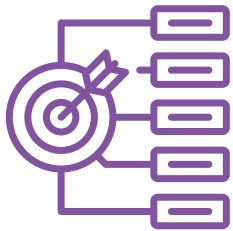
The **pearl** alludes to the symbol of love and is linked to the Yin Yang principle of Chinese philosophy, welcoming and creative femininity.

The image of the pearl inside its **shell** tells about the effort that is made to acquire it, the same effort that is part of the search for truth, for self-knowledge .

Campaign Logo



Campaign Objectives



01.

Sensitize

Sensitize the population for the cause of maternal mental health;

02.

Promote

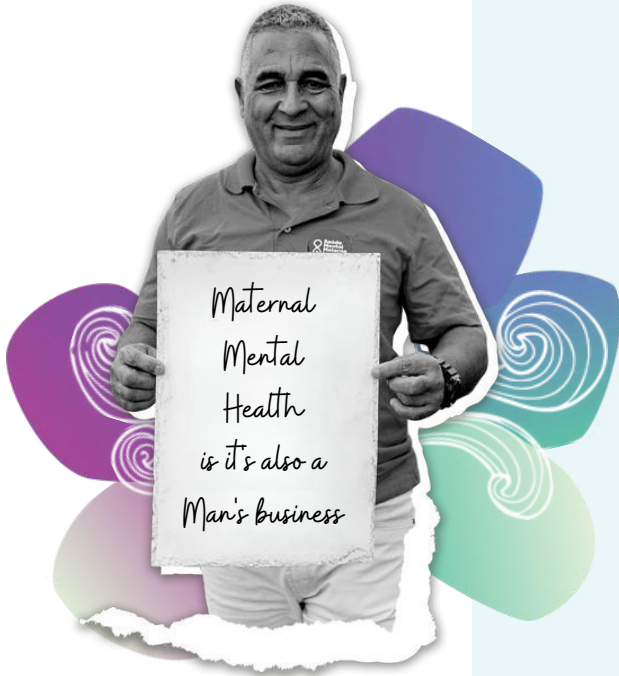
Promote awareness actions on maternal mental health based on scientific evidence;

03.

Encourage

Foster the construction of public health policies, through build that establish the month of May as the month of attention to maternal mental health everywhere.





We are not a female campaign!

The cause of maternal mental health belongs to everyone! It matters to all citizens.

Despite this, we still have a low representation of male supporters of the cause.

In addition, women get sick twice as often depression compared to men. The biology alone does not explain this phenomenon and it is necessary to contextualize all the impact that being a woman and being a mother can generate in the psychic life of different mothers and different women that we have in our countries.

*Data from March 2023



Mothering is a political act and also matters of Public Health!

It is not possible to promote maternal mental health and transform the current lack of assistance without the construction of public health policies and laws that support and assist women-mothers.

Effective assistance needs to be available from earlier stages of motherhood (pregnancy) and continuing through the years

Implementation of preventive support assistance, and public programs that brings quality information (for mothers and parents) and adequate training and support (to perinatal professionals) in maternal mental health would be a huge progress towards the problem.



Who do I neglect when I take care of who I take care of ?

- Perinatal, from pregnancy to two years of postpartum, is a period of turbulence for women who need to adapt to simultaneous changes at the biological, psychological, and social levels resulting from pregnancy, childbirth, postpartum and the demands of motherhood, family, relationship, and professional roles.
- When entering the parental pathway, women and partners need a team, an assistance team at their side and accurate information and encouragement to follow an empowered and unique path on this journey.
- For this to happen, care professionals also need support, so that they can masterfully deliver and carry out these functions of caring for those who care - the mothers.
- The Health and Mental health system in Ireland is struggling, professionals are under pressure and there is not enough input through public policies regarding our field of work. We are struggling here in so many instances that of course this affects the services and the mothers.



Who do I neglect when I take care of who I take care of ?

- Talking on maternal mental health there is evidence that events during pregnancy and birth, such as premature birth, traumatic birth and serious unnecessary procedures and hospitalizations, can be traumatic and lead to post-traumatic stress disorder.
- One in five women experience so intensely and painfully this challenge that they develop mental disorders during the perinatal period. Unfortunately, more than 50% of women are not diagnosed early and 75% of them do not receive adequate treatment and/or support.
- The lack of timely and adequate assistance in public health directly impacts the rates of preventable maternal death, with suicide being one of the main causes.
- This is a worrying aspect worldwide. Maternal suicide occurs most frequently between 6 and 12 months after childbirth. Suicidal maternal behaviour is related to unfavourable obstetric outcomes, birth trauma experience, restrictive care model and history of pre-existing mental illnesses.
- The training and qualification of health professionals about the psychodynamics and mental health of women during pregnancy and postpartum is an essential tool in the policy of promoting and supporting perinatal mental health and maternal suicide prevention.





Maternal Mental Health is Everyone's problem



“According to data recorded in the Maternal Mortality Monitoring Panel, in 2021, for every 100,000 births, Brazil had an average of 107 deaths of puerperal women in the first 42 days after childbirth, an increase of almost 95% in the number of maternal deaths and 258% higher than the proposed target 2.

Considering worldwide studies, it is estimated that 3.7 women commit suicide in the postpartum period for every 100,000 live births. For comparative purposes, 1.92 women die from postpartum haemorrhage at the same rate. Most of these deaths could have been prevented.”

² Maternal Mortality Monitoring Panel. 2021. Available in <https://agenciabrasil.ebc.com.br/saude/noticia/2022-05/brasil-teve-em-2021-media-d-e-107-mortes-cada-100-mil-nascimentos>

³Chin, K., Wendt, A., Bennett, I. M., & Bhat, A. Suicide and Maternal Mortality. *Current psychiatry reports*, 24(4), 239–275. 2022. <https://doi.org/10.1007/s11920-022-01334-3>.





Maternal Mental Health is Everyone's problem

Maternal mental health is fundamental to achieving global health targets relating to women and children because of its direct and potentially long-term impact on their general well-being and social and economic participation. It also influences women's care-giving capabilities, which in turn impacts children's health and development. Addressing maternal mental health requires comprehensive and holistic models of care in which psychosocial assessment and treatment can be provided through integrated primary health care. Access to simple, reliable and affordable means of identification and management of mental health problems is a basic human right.





Maternal mental health is everyone's problem in Ireland!

THE IRISH TIMES

Oireachtas

Almost 15,000 women affected by perinatal mental illness per year, HSE says

"**Prof Anthony McCarthy**, a consultant perinatal psychiatrist at the **National Maternity Hospital**, said a mother is 19 times more likely to be admitted as a psychiatric inpatient in the first six weeks after the birth of a baby than in any other six-week period in her life."

The psychological and social challenges of pregnancy are "considerable for many", he said.

"Suicide is the second most common cause of maternal death in this country, he added, and infanticide, while rare, "is frequently preventable and rates are probably underestimated".

<https://www.irishtimes.com/politics/oireachtas/2022/10/18/almost-15000-women-affected-by-perinatal-mental-illness-per-year-hse-says/>





16% of women in Ireland are at probable risk of depression during their pregnancy

A population survey of the prevalence rates of antenatal depression in the Irish Maternity Services showed that one in six pregnant women – or 16% of pregnant women – are at probable risk of depression during their pregnancy[1]

[*https://www.nwci.ie/womens_mental_health_information](https://www.nwci.ie/womens_mental_health_information)



Maternal mental health is everyone's problem in Ireland!



Trinity College Dublin
Coláiste na Tríonóide, Baile Átha Cliath
The University of Dublin

Reality of maternal mental health for first time mums in Ireland: study

"A newly published study from Trinity's School of Nursing and Midwifery has followed the prevalence of, and changes over time in, depression, anxiety and stress symptoms experienced by first-time mothers – from pregnancy throughout the first postpartum year".

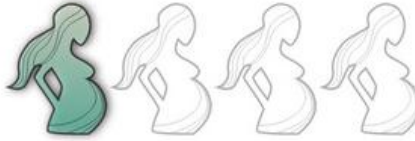
"No national database exists to collect information about women's mental health in pregnancy and postpartum in Ireland. A handful of studies conducted in specific hospitals/units, or by individual researchers, may only look for example at only depression during pregnancy, or depression and anxiety up until six weeks postpartum".

"This means that women are not supported by a maternity care system that can detect and offer timely treatment to women who need it".

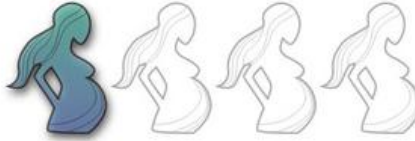
****The published study: Maternal mental health in the first year postpartum in a large Irish population cohort: the MAMMI study can be viewed here: <https://bit.ly/3vFgLqQ>**



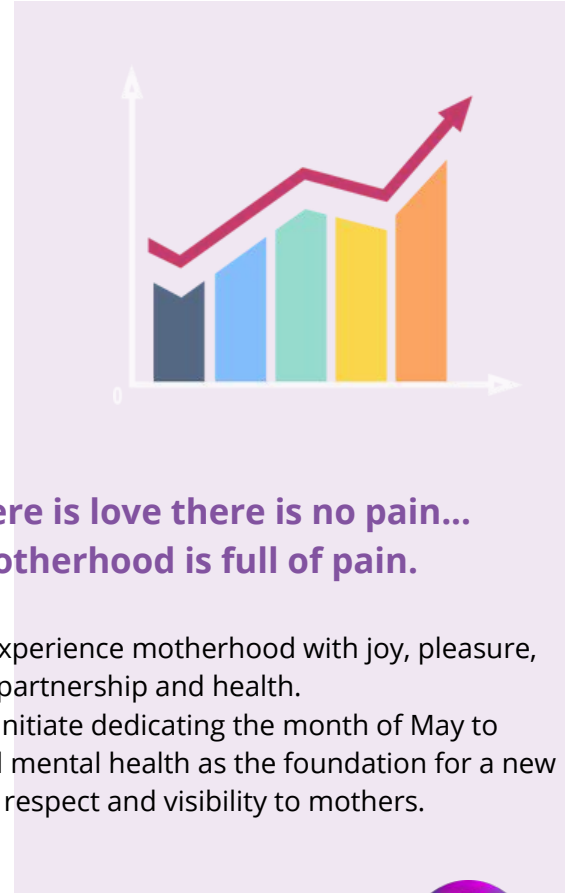
1 out of 4
women suffer
violence in childbirth



1 out of 4
women have
postpartum depression



1 every 2
women lose
work after becoming a mother



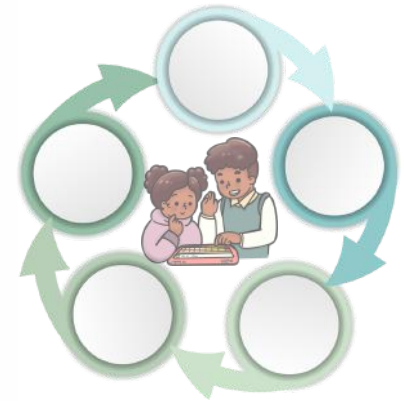
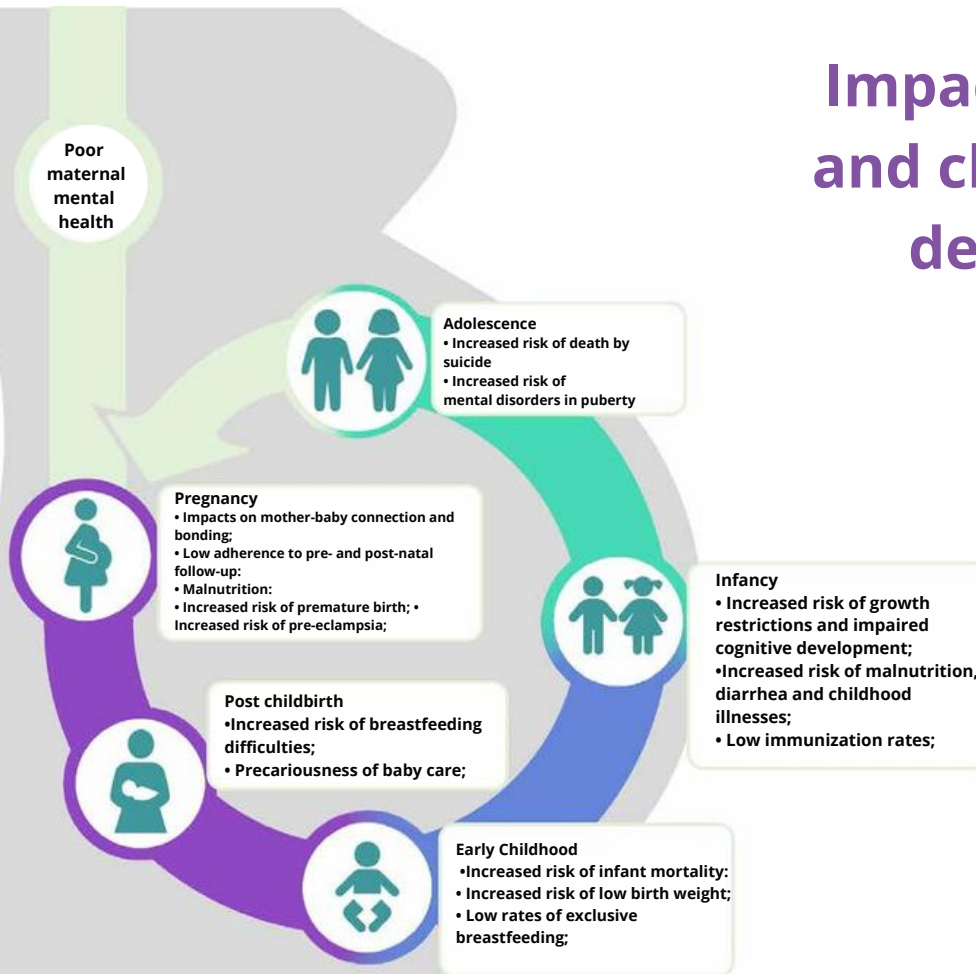
**Where there is love there is no pain...
but motherhood is full of pain.**

Mothers want to experience motherhood with joy, pleasure,
partnership and health.

That's why, we initiate dedicating the month of May to
promoting maternal mental health as the foundation for a new
culture of respect and visibility to mothers.



Impacts on women and child and youth development





This cause is a fight for childhood too!



Mothers affected by perinatal mental disorders may not provide adequate care, as a result of which the child's growth and development may be negatively affected. We therefore reinforce that by raising awareness about maternal mental health, we are also assisting childhood

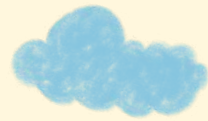
"This fight is not only for mothers, but also for children who suffer and are directly impacted by such conditions.

Several studies affirm that maternal depression has a negative impact on different aspects of children's development and mental health.

Mothers living with depression have less stimulatory, sensory, cognitive and affective skills to children ."



Support This Cause !! Get in Touch!



We can choose to invest early to reduce inequalities and avoid failures, or we can face the consequences and act later, when become more challenging and expensive to be minimized.

James Heckman
(Nobel Prize in Economics)



We cannot think of unique solutions that treat suffering that has different paths in the same way. We need to propose specific approaches for each audience to adequately and assertively promote the culture of mental health promotion and prevention.

The fact is that we are losing our women, our mothers, not only through real death but also through death as life, many giving up on living, just surviving, without dignity, without support, without pleasure, in an invisible way.



There is no Health without Mental Health!



Maternal Mental Health: Why it Matters and what Countries can do!

Despite being a basic right for every woman and important for the psychosocial well being of women and their children, recognition of maternal mental health has not been a priority on health agendas for many countries specially low- and middle-income ones.

Mental health and non-communicable diseases have emerged as a central focus for public health experts globally.

A paradigm shift towards integrated approaches ensures a responsive health system with strategies in place not only for treatment and care, but also for the promotion of maternal mental health and prevention of mental health problems through broader, cross-sector linkages.

Prevention, attention and actions in primary care are key.

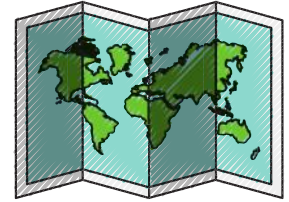


Maternal Mental Health: Why it Matters and what Countries can do!

Common perinatal mental disorders (CPMDs), essentially comprising depression, anxiety and somatic disorders, are one of the major causes of disability during and after pregnancy, affecting the quality of life of both mother and child.

A major problem is the difficulty of detecting CPMDs in resource-constrained health systems. During regular antenatal and postnatal visits, primary symptoms of these disorders - like poor sleep, fatigue and low appetite - can go easily unnoticed by health professionals who have no training in mental health screening.

A lack of trained health workers, along with insufficient resource allocation for primary care and weak health systems further contributes to the problem.



What works!

Comprehensive and integrated primary mental health care is a concept that takes into account the complexity of the interaction of physiological, social and psychological factors for mental health care provision at primary and community level. As such, it offers a solution for addressing maternal mental health.

It can be achieved by taking into account WHO's building blocks for health systems, i.e. appropriate and timely service delivery, a trained health workforce at primary care level, improved health information systems, equitable access to essential medicines and enhanced financing, and effective leadership/governance at national, local, health facility and community levels.

Appropriate tools that can be integrated within the health system for comprehensive planning, education and training of health care providers, and delivery of services at primary level to manage mental health problems. Perinatal Psychology can help to implement tools as Psychological prenatal to assist woman emotionally.



What works!

Such services need to be incorporated into routine antenatal and postnatal care services to reach a greater proportion of women at a minimal cost. Recent analysis indicates improvements in maternal mental health through psychological and health promotion interventions given during the antenatal and postnatal periods. These have been effective in reducing the symptoms of CPMDs through non-pharmacological interventions provided by trained and supervised non-specialist health professionals.

Agenda for action and an integrated system involving identification of mental health problems through the application of context appropriate assessment methods during routine antenatal and postnatal visits, followed by provision of psychosocial support and appropriate referrals as needed, can improve both maternal and child health outcomes.

Simultaneously, innovative preventive programmes targeted at promoting maternal psychosocial well-being and raising awareness among women and their partners of the danger signs, along with social support through participatory women's groups and/or health visitors, may also be beneficial. However, careful evaluation is required to see how these interventions work.



Therefore, Maternal Mental Health transcends an individual issue, being a fundamental health concern public that concerns everyone.



IRIS May 2024 Forward ...

Ireland 



1. Raise Awareness: One of the primary objectives of a maternal mental health campaign is to raise awareness about the importance of maternal mental health and the prevalence of mental health issues among new and expectant mothers. This can be achieved through public service announcements, social media campaigns, educational materials, and targeted outreach to healthcare providers and community organizations.

2. Reduce Stigma: Another crucial objective is to reduce the stigma associated with maternal mental health challenges. Many women hesitate to seek help or disclose their struggles due to fear of judgment or societal pressure. The campaign can focus on promoting empathy, understanding, and acceptance of maternal mental health issues by sharing personal stories, organizing panel discussions, and conducting media interviews with experts and affected individuals.



IRIS May 2024 Forward ...

Ireland 



March with Midwives 2022
Birth Rights Alliance

3. Promote Early Intervention: Encouraging early identification and intervention is essential to prevent the escalation of maternal mental health problems. The campaign should emphasize the importance of seeking help at the earliest signs of distress and provide information about available resources such as mental health helplines, support groups, introduce in the system Psychological Prenatal, and healthcare professionals who specialize in maternal mental health.

4. Enhance Access to Care: Many women face barriers to accessing mental health care, including financial constraints, lack of awareness about available services, and limited availability of specialized providers. The campaign can advocate for increased funding and resources for maternal mental health services, work towards integrating mental health support within prenatal and postnatal care, and provide information about affordable or free options for mental health care in Ireland.

5. Empower and Educate: Empowering women with knowledge about maternal mental health is crucial. The campaign should provide educational materials and workshops that cover topics such as self-care, stress management, coping strategies, and the importance of social support. Additionally, providing information about the impact of maternal mental health on child development can help motivate women to seek help for their own well-being and the well-being of their children. Work together with organizations and Public sector.



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[maiofurtacor](https://www.youtube.com/maiofurtacor)

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It is only possible to change the world.
Taking care of those who take care of everyone.
Lets do it together



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