

Short Communication





# The impact of emotionally supportive volunteers on new mothers

#### **Abstract**

"Motherhood...it's a huge change not only physically, but mentally, you're not working, you've got a young person who is totally dependent on you. Your sense of self changes as an individual as well. It's a very vulnerable time, and relationships change, relationship roles change...having a Caring Mums' volunteer there provided an outlet to talk about all those changes." Caring Mum Participant.

Keywords: new mothers, trusting relationships, parenting confidence

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### Introduction

The Caring Mums program, powered by the National Council of Jewish Women Australia Victoria, is a non-denominational, free service providing emotional support to mothers of infants and pregnant women. The program matches trained volunteers to mums with the goal of developing secure, trusting relationships, while offering both proactive and reactive care by empowering these women.

Through regular weekly meetings for up to a period of 12 months, mothers' feelings of isolation, anxiety, and depression decrease, while their parenting confidence, sense of belonging and connection significantly increase. This has countless benefits on their infants' development, wellbeing, and attachment.

Caring Mums main objective is to improve mothers' health and wellbeing while building their confidence to strengthen the bonds with their babies. Volunteers provide mentoring, validation, normalisation and encouragement, by bearing witness to their mother's unique journey of motherhood. The mothers then feel better about themselves, more empowered, while knowing that it is normal and OK to reach out for support.

## The need

The need for Caring Mums was originally established through consultation with Maternal & Child Health (MCH) nurses, Perinatal Anxiety and Depression Australia (PANDA), Child First, Anglicare Family Services and social workers from Melbourne's major maternity hospitals. The program developed in response to ever-growing awareness that women often feel alone at a time that they most need to feel connected to and supported by others. The pressure on mothers today is huge and bridging the gap between the dream of motherhood and its reality can be very challenging. Caring Mums developed a creative way to help this transition by offering a more realistic method while eliminating social and personal unrealistic expectations. It came into existence to fill the gap in the perinatal sector for the provision of emotional support to all mothers.

Caring Mums is based on Attachment Theory and other studies examining the importance of emotional support in motherhood transition.<sup>1,2</sup> There is extensive evidence illustrating that mothers who feel well supported are more likely to provide their infants with the sensitive support they require and deserve.<sup>3–8</sup> Caring Mums offers protective factors such as positive emotionality and positive parenting behaviors, which play a significant role in reducing associations

between maternal depressive symptoms and child behavioral problems.

Caring Mums provides a high-quality service, specifically targeting the challenges of the transition into motherhood. The program aligns with the studies and research of Daniel Stern as he argues in his well-known book 'The Motherhood Constellation' "The new mother feels the need for a 'grandmother' character to strengthen her and her motherhood, and to witness the connection between her and her child." This validation from an external source provides the confidence for a mother to provide a loving and secure environment, in which her child can flourish. Caring Mums aims to provide this model to those mothers without their familial networks.

## **Participants**

Mothers and babies in disadvantaged circumstances (as women living in poverty, socially isolated, single mums, migrants and refugees or asylum seekers,) have been found to be even more vulnerable in the perinatal period as they are less likely to have direct family support or access to maternity and child health services. However, these circumstances can be facilitated in different ways in order to make the environment of the new mum and child more positive. However,

Today with increased global mobility, uprooted families are often challenged to create new networks and support systems. Isolation can occur for many reasons including relocation, immigration or family breakdown and these factors may compound anxiety, depression, and grief.

The Caring Mums' target audience are pregnant women and new mothers who are looking for additional emotional support during their early journey of motherhood. The program is open to all mothers including those who are new immigrants, refugees, asylum seekers, single mothers, mothers with mental and physical health issues, family violence survivors and mothers who do not fall into any specific category but just want someone outside of their inner circle with whom to talk. We are both a preventative and a reactive service, aiming to give mothers support before a crisis develops. Early intervention, in the form of support or specific care, can help women to adjust to the emotional changes of the postnatal period and prevent other serious mental health conditions to develop.<sup>5,11</sup>

We work closely with the referral sources and aim to meet the needs of the mothers by having our trained volunteers come from a range of backgrounds and from a broad age range. This ensures we





deliver the service in a culturally appropriate manner and helps to fill the gap of physically and emotionally absent family members, creating safe space for everyone.

## Filling the gap

Caring Mums is different from other programs as it addresses the need for educating new mothers whilst emotionally supporting them in a non-judgmental way, providing a safety net for those who are more vulnerable. The program is unique as it is both a professional service, and an informal sensitive relief to those who are already dealing with mental health issues, as well as for those who need proactive support to prevent mental health issues from developing. The volunteers are well trained and are each overseen by a supervisor who is either a family therapist, psychologist, or social worker. This enables our service to uphold the highest of standards. The volunteers undergo an intensive 20-hour training course focusing on communication skills and red flags for mental health issues and domestic violence. Experts from PANDA, MCH nurses, Department of Health and Human Services (DHHS) and the Family Violence sector take part in the training. This strengthens our existing relationships with these referral sources and clarifies the ways in which we can support each other. It also gives assurance that we are not replicating what is already available but are filling in the much-needed gap of providing emotional support to new mothers and pregnant women. The volunteers attend compulsory fortnightly professional supervision where challenges and successes are discussed and where ongoing learning takes place. It also provides the program with an on-going report of each mother's progress and helps ensure that boundaries are maintained between the mother and her volunteer.

Caring Mums in one of the few programs in the perinatal sector where women do not have to have a diagnosis or fit into any particular category in order to be eligible. This way we support many women who would otherwise fall through the cracks of being eligible for other existing services.

In 2017 an external evaluation was conducted to identify outcomes of Caring Mums, particularly in relation to the mother's health and wellbeing. The report found that most people perceived the program as extremely positive. It highlighted the positive profile we have in the community, nd showed our mothers had significant decreased feelings of depression, isolation and anxiety and significant increases in confidence and sense of connection: "Participation in the program results in better mental health and sense of empowerment for mums, as well as greater awareness and use of services.<sup>12</sup>

# COVID-19

In addition to the 'usual' challenges new mothers face, the effect COVID-19 had and is still having on motherhood is palpable, as the enforced isolation created new difficulties, raising the risk of PND, anxiety and OCD. Caring Mums adapted its program to these new needs, acknowledging that having a volunteer focusing on the mother helps fill the void of absent friends and families, allowing the mother a safe space to speak freely about her feelings. We continued to see mums in our current catchment whilst growing our service into new areas, using technology. To keep our participants safe, we replaced face to face contact with virtual platforms. We continued to accept referrals, conduct intakes and match mothers to volunteers while weekly connections between participants were maintained.

We introduced a virtual mothers' group (Caring Mums Together), creating the one space in which mothers could meet other new mothers. They shared their disappointments in having to be so isolated

at a time when they really needed a village around them. They offered support, company and advice to each other and many kept up this relationship once restrictions were lifted.

We produced a monthly newsletter for participants, volunteers and referrers that included relevant articles, interviews, Podcasts and Ted Talks. We hosted "Caring Mums Conversations" offering additional connection, education, and support with expert guest speakers on appropriate topics.

COVID- 19 was an example of the way Caring Mums responds and will continue to respond to the grassroots needs of our mothers, making sure they feel safe and supported in any scenario:

"My volunteer gave me guidance when I asked for it and never overstepped in giving her opinion. Talking to her would always lift my spirits. During the pandemic lockdown she called or Facetimed with me every week... she would listen, answer any of my questions and just allow me to confide in her with any troubles I was having that week with my daughter or my family. She instilled confidence in me as a person and as a mum that I was not able to get from my biological mum. I am a better and more confident mum because of this program." Caring Mum Participant.

## **Summary**

Overall, Caring Mums fills a specific gap in the community in the way it focuses solely on the mother. Through the program, our mothers gain a safe, secure space in which they can share openly both the highs and the more challenging aspects of motherhood, without fear of being judged. In the words of one of our special mothers:

"The point of Caring Mums is that they focus on YOU. For once, someone was asking how I was instead of ignoring my needs and focusing on my baby. Someone cared about ME and it was nice to feel important as I felt like I faded into the background. After having my daughter, I lost my identity as an individual and just became 'Mum' which, don't get me wrong, being a Mum is my greatest blessing, but becoming a parent was much harder than I ever imagined and I didn't expect to struggle" Caring Mum Participant. To hear and see the impact our service has on both the mothers and volunteers please follow the link:

https://www.youtube.com/watch?v=b-gcgTB4eQQ

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## **Conflicts of interest**

Author declares that there is no conflict of interest.

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## References

- Stern D. The Motherhood Constellation: A Unified View of Parent Infant Psychotherapy, Routledge, New York; 1995.
- Paris R, Gemborys MK, Kaufman, PH, et al. Reaching Isolated New Mothers: Insights From a Home Visiting Program Using Paraprofessionals. Families in Society: The Journal of Contemporary Human Services. 2007. p. 616–626.
- Austin MP, Priest SR. Clinical issues in perinatal mental health: new developments in the detection and treatment of perinatal mood and anxiety disorders', Acta Psychiatr Scand. 2005;112(2):97–104.

- Beck CT. The effects of postpartum depression on maternal-infant interaction: a meta- analysis. NursRes. 1995;44(5):298-304.
- 5. Centre of Perinatal Excellence (COPE). Mental Health Care in the Perinatal Period: Australian Clinical Practice Guideline. 2017.
- Eastwood JG, Jalaludin BB, Kemp LA, et al. Relationship of postnatal depressive symptoms to infant temperament, maternal expectations, social support and other potential risk factors: findings from a large Australian cross–sectional study. BMC Pregnancy Childbirth. 2012;12:148.
- Milgrom J. Depression in Pregnancy and the Postpartum Period. *InPsych*. 2017;39:1.
- Murray. The impact of postnatal depression on infant development. J Child Psychol Psychiatry. 1992;33(3):543–561.

- Mcleish Redshaw. Peer Support during Pregnancy and Early Parenthood: a Qualitative Study of Models and Perceptions', BMC Pregnancy and Childbirth. 2015;15:257.
- Sameroff AJ, Fiese BH. Models of Development and Developmental Risk.
  In: CH Zeanah Jr, editor. Handbook of infant mental health, The Guilford Press, New York; 2000. p. 3–19.
- 11. Newman L. Parents with borderline personality disorder approaches to early intervention', *Australasian Psychiatry*. 2015;23(6):696–708.
- 12. Radermacher H, Sampson E. Caring Mums Evaluation Report. 2017.