

OUR IMPACT

**IMPACT
REPORT**
2018/2019

Making an impact for 15 years

Acacia has much to celebrate in marking its 15th year of supporting families across Birmingham and we know our support is needed more than ever.

Over the past 12 months, 535 families affected by perinatal mental health issues (particularly pre and postnatal depression and anxiety) were referred to Acacia. We have supported their journey to recovery by offering a variety of different support services that all share the same ethos of hope, reassurance and kindness. As this report shows, we also know that our support is having a significant impact on parents' lives.

In November 2019 I will step down as chair of trustees and as I look back over my time, a number of key highlights stand out...

Acacia is made up of a wonderful team of paid staff and 50 plus exceptional volunteers. Most of the team have their own experiences of postnatal depression or other mental health issues and this ability to genuinely understand what parents are going through is vital to the success of our services.

In keeping with the Christian aims of the charity, our recent growth and development has focused on ensuring that we remove barriers for vulnerable groups, particularly younger parents, mothers from BAME communities, and dads and partners.

“Over the past 12 months, 535 families affected by perinatal mental health issues were referred to Acacia. We have supported their journey to recovery by offering a variety of different support services that all share the same ethos of hope, reassurance and kindness.”

Our fundraising programme has seen excellent growth. To our fundraisers, who have climbed, walked, cycled, baked, jumped out of planes to name a few, thank you so much.

Celebrating our 15th birthday in March 2019 was wonderful and we were able to celebrate the fact that we have remained true to the original vision and mission of Acacia's founders, Emma Borg and Rachel Gregory.

Sadly, the last 12 months are also rightly remembered for the death of one of our founders, Emma Borg. We, along with her family, mourned her passing, but we are constantly reminded of the principles on which we were founded: to support mums and their families affected by pre and postnatal depression and to offer that support at a local level, close to home.

As I handover the role of chair, I leave an organisation that is now half way through its five year strategic plan and we have high hopes for what the future holds. It has been my privilege to be a part of this wonderful charity, year on year hear the personal stories of how lives have been helped, supported, changed and at times even saved.

I leave Acacia Family Support in a very strong position for the future and in a position of genuine excitement for the next chapter as we look to expand and support even more families. Thank you to everyone who helps make Acacia the life changing charity that it is and thank you for the time, energy and funds that have been donated in so many ways.

Rev Lee Plummer
Chair of trustees, Acacia

Why we exist

Up to 20% of women develop a mental health condition at some point during pregnancy or in the first year or two following birth.

Acacia's vision is of a world where every family affected by pre or postnatal mental illness receives timely and effective support close to home.

Our mission is to improve the lives of mothers and families affected by pre and postnatal depression and/or anxiety. All of our work is underpinned by our Christian ethos and values.

About this report

Acacia are now in their 15th year of supporting families. This impact report draws on the evaluations below, together with a new evidence review and analysis of impact data for the year 2018/2019:

- **An evaluation and impact report** (October 2019) by Dr Nahid Ahmad, an independent research consultant and chartered psychologist
- **An evaluation report** by RHCS (April, 2019), which sought to identify the broader social issues with which Acacia beneficiaries present.

Why we exist



The costs and consequences of perinatal depression and anxiety (PND) are well documented, and far-reaching. These include physical and developmental outcomes, effects on parenting and bonding, future mental health issues, and employment and

productivity. Longer term impacts for children also include poor educational achievement and productivity in adulthood.

In the UK, the total cost of perinatal depression, anxiety and psychosis amounts to £8.1 billion per year.

The challenges presented by perinatal depression are further magnified by low detection rates and patchy services, stigma and fear (of baby being taken away), low awareness of perinatal mental health issues amongst the general population, and training needs and confidence in detection amongst the primary care workforce.

Health policy over recent years has addressed the need for improvements to care for perinatal mental health. To date, this additional funding has been dedicated to specialist NHS services for those with the highest need, rather than for parents who are most likely to need the type of support Acacia offers.



Who we support

During the year, 535 families we referred to Acacia for support for a perinatal mental health issue – particularly pre and postnatal depression and anxiety. At point of entry to our services...

82%



of mothers had moderate, moderately severe, or severe **DEPRESSION***

83%



of mothers had moderate or severe **ANXIETY***

Alongside their depression and/or anxiety, service users typically present with a variety of complex needs:



27% reported facing **family conflict**



25% had an additional **medical condition**



20% were on **low incomes** or unemployed



10% experienced domestic, sexual, or emotional **abuse**



30% reported **other issues**, such as ill health of a child or partner, general anxiety and housing issue

* Based on PHQ9 and GAD7 criteria from 159 mothers' entry scores during the year

Who we support



“ I had never voiced my mental health problems before and I can remember feeling so relieved that other mums were struggling the way I was. I wasn't too much of a weirdo! Other people thought like me too! ”



50% were living in the **25%** nationally **most deprived areas** or worse



89% Suffered from **low self esteem**



75% did not feel **confident** in their role as a parent



52% did not feel **proud** to be a mother



1/3 were from **BAME** backgrounds



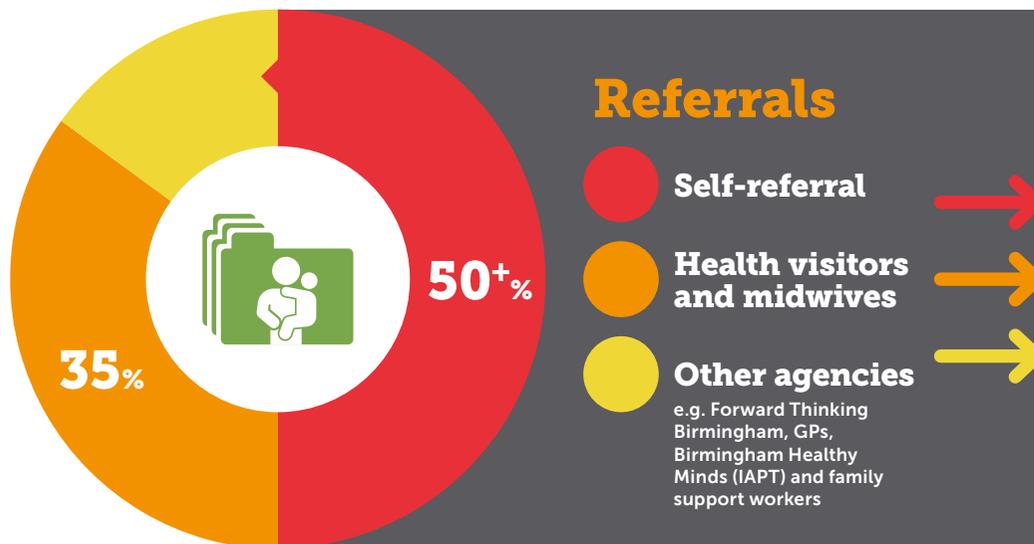
20% were **young parents** (school age to 24)

30 years was the **average age** of mothers we supported

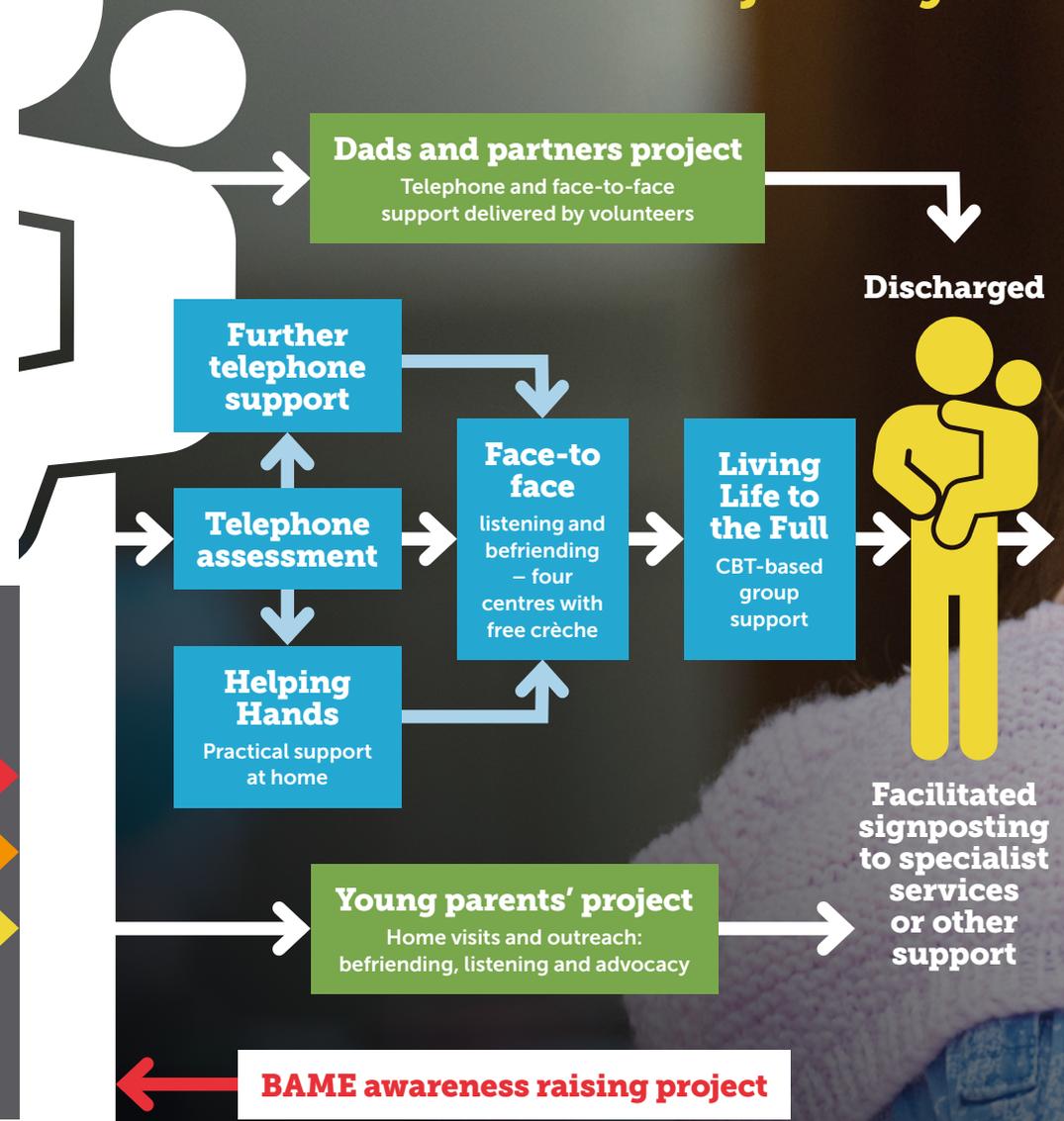
How we support families

Acacia Family Support is a Christian charity and the only local charitable organisation in Birmingham offering specialist support for mums, dads, partners and their families living with pre and postnatal depression and anxiety.

The core ethos of Acacia's support is 'hand-holding' and acts of kindness. Services are delivered by a team of staff and volunteers, most of whom have their own lived experience of postnatal depression and/or other mental health issues. Services are delivered via telephone, in the home and face-to-face, from four centres across the city. A free on-site crèche is provided at each centre.



Our service user journey





76%
of our **staff** have
lived experience
of **perinatal**
mental illness
or **other mental**
health issues

How we support families

Telephone support

This starts with a thorough assessment which takes around an hour, acting as the first point of intervention. As well as assessing service users, support, guidance, hope and reassurance are offered at this entry stage. In this first contact it is important to normalise the feelings and struggles relayed by women (and families), as well as to suggest coping tools and tips, thus facilitating a beginning for the journey to recovery.

Face-to-face support at a non-clinical community setting

Service users are assigned volunteer befrienders who take on a listening and befriending role. They are invited to one of the four centres for one-to-one support with them. Length of support is not time-bound.



Living Life to the Full* group sessions

This is an 8 week group based validated CBT programme for improving wellbeing and resilience. Further sessions are also delivered that cover mindfulness, relaxation and relationships sessions called 'Let's Stick Together'.

* For further details see: www.llttf.com/about-llttf

How we support families

Helping Hands at Home

This is a small project delivered by a part-time paid worker and volunteers. It delivers support in the home for parents and in some cases is used as a stepping stone into centre-based support. It includes a home visit combined with three to four practical support visits (e.g. cleaning, cooking, recipe planning, holding the baby) which are vital for mums who are feeling overwhelmed by the practicalities of motherhood combined with mental distress. The service is accessed through internal referrals from staff.

Young Parents' Project (YPP)

This project has been running for three years now, part-funded by NHS Forward Thinking Birmingham. Funding has been agreed to continue it until at least April 2021. Service users are women and parents under the age of 25 years. Support has a predominant focus on prevention and early intervention approaches – the original brief for the project emphasised that this is not a crisis support project.

Support offered through this project differs from Acacia's core services, in that it is mostly delivered outside of the four centres. The project combines home visits with outreach and advocacy – something which has been shown in the evaluation of the project (Street, 2017) to be integral to this vulnerable group's access to support. Often these service users have a range of social complexities requiring advocacy with other agencies, such as social services, as well as more practical support such as help with applying for jobs or college courses.

Crèche

Each centre offers crèche facilities which provide valuable respite for mums whilst they access support for themselves. Being able to provide this service enables more women to access support outside their homes, as well as to have some uninterrupted time for themselves.

Dads and partners project

This support is specifically for partners of mothers and is delivered by a team of volunteers. Service users are supported through befriending and listening sessions, mainly using telephone support, although some service users will also come to a centre for face-to-face support.

BAME awareness raising

This is a workstream which runs separately to Acacia's main support services and aims to remove barriers for vulnerable mothers to access support.

A multi-generational approach is taken and awareness raising sessions are held both with BAME community groups and with professionals supporting these communities. The key messages delivered to communities include:

- The nature of PND
- That help is available
- That women can recover.

A multi-generational approach is taken to gradually increase the understanding of PND in these communities.

A tailored approach to working with different BAME groups is adopted – for example for a South Asian women's group, information about PND and anxiety was embedded within a wider wellbeing programme.

How we support families

Our incredible volunteers

Our volunteers are without doubt, the beating heart of our organisation.

During the year, 50+ regular volunteers gave over 5,000 hours to Acacia via a variety of different roles including: weekly befriending sessions, home visits, crèche support, admin, fundraising, hospitality, supporting group work sessions.

In our 2018 volunteer survey...

- **95%** rated volunteering at Acacia as an **8, 9 or 10**
- **91%** felt **valued** and appreciated
- **96%** of volunteers said their **self-confidence** had improved as a result of volunteering for Acacia
- **67%** of our volunteers have **lived experience of PND** or **other mental health** issues

In 2018, our volunteer training programme became accredited via the Open College Network.



“ I started befriending with the lovely (volunteer) who had such patience and motherly understanding, I felt supported and reassured. ”

Our impact in 2018/19

How we collect our data

Our mental health outcomes data comes from two clinical measures of depression and anxiety, the PHQ-9 and GAD-7 questionnaires. These are the IAPT recommended tools for measuring these conditions (IAPT manual, 2019), and are also amongst the tools recommended by NICE (NICE, 2011b; NICE, 2012; NICE, 2014).

Roughly a third of our service users (159) completed the clinical measures in 2018/19. 154 service users were female, and five were male. In this Impact report we have compared entry and exit scores.

Telephone support is crucial to Acacia's services, being the main entry point for referred service users. Assessment and support are combined in an initial call lasting up to 1.5 hours. During the year, 400 parents responded to telephone evaluation questions at the end of the phone call.

“ Even though I have been too scared to talk to anyone, the kind smile of the ladies on reception, the tea ladies and crèche aunties have always made me feel welcome. I have never felt that I was a burden, (which is a massive thing for me) I felt that I could come whenever I felt I needed to. There is such a very special feeling around Acacia, it is so warm, caring and full of empathy, support and acceptance. For me it has felt like being part of an extended family. ”



535 families were referred to Acacia for support

418 were new referrals

23 dads received individual support



14-16 weeks is the average length of service

Most service users usually receive a telephone assessment within **1-2** weeks

Analysis of mental health data show a significant majority of service users see reduced scores for anxiety, depression, or both, by the time they exit the service:



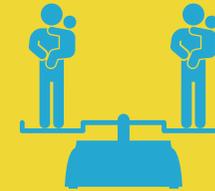
86% of women had reduced anxiety scores

90% of had reduced depression scores

The changes in entry and exit scores are statistically significant and show real change (not change which is due to chance).

Recovery rates are higher in mothers from BAME backgrounds and young parents aged 18-24.

How do we compare?



Acacia is a voluntary sector organisation, relying heavily on a volunteer workforce. Staff and volunteers are not clinically trained, nor are they delivering a clinical service. Yet, Acacia's services are having an impact which is **equivalent** to the national standard for recovery set by the NHS IAPT (Improving Access to Psychological Therapies) service. This demonstrates the quality of support, as well as the value for money provided by Acacia.

NICE recommended care

Our support services align with NICE recommended care:

1. Service users are given person-centred care which conveys messages of hope for recovery
2. Support models are consistent with the recommendation for mild/moderate mental illness
3. Communication with other agencies in the health and social care sector is strong
4. Acacia has contributed to, and is embedded in local pathways
5. We use validated tools to monitor service user symptoms and progress.

Our impact 2018/19



400 parents received telephone support

384 were mums
16 were dads

99% of mums | **100%** of dads rated the support they received as either **good, very good, or excellent**



95% stated that they felt **more optimistic** and **less anxious**



98% felt more **supported** and were equipped with **strategies** that would help them to **cope**



94-100% rated the service **positively** on **5 different questions**, including improved **optimism for recovery** and learning new **coping strategies**

We provided **BAME awareness raising** workshops to **134 BAME women** and community members and **77 professionals** working with BAME women.



91% of **BAME** community members attending awareness raising sessions said that their **understanding of low mood and anxiety** in the pre and postnatal period had **improved**

A consistent theme via feedback is the warmth, compassion, and non-judgemental understanding they have received from staff and volunteers.

When parents were asked about the most beneficial aspect of Acacia support, the three most popular responses were:

1. Support from someone who understood what I was going through
2. A safe space to go where I wouldn't feel judged
3. Help to normalise my feelings.

Acacia staff and volunteers are highly valued. Qualitative data show how the Acacia workforce is applauded by service users and partners alike.



98% would recommend **Acacia** to friends and family

Partnership working

Evidence shows that there are many benefits to be gained when statutory services work in partnership with the voluntary sector to support families with postnatal depression and anxiety.

Acacia's longevity and excellent reputation can in part be attributed to our active partnership work, which has helped to embed our services across local perinatal mental health pathways.

We are active participants in all of the Birmingham-based groups and networks for perinatal mental health. Clients with higher levels of need are stepped up into IAPT services which are delivered within Acacia via a partnership with Birmingham Healthy Minds. Higher needs are also met through further partnership working with Forward Thinking Birmingham and specialist community perinatal mental health teams.

Core funding sources for Acacia include Birmingham and Solihull CCG (maternity workstream) the National Lottery Community Fund and Forward Thinking Birmingham together with a variety of different charitable trusts and foundations.



“ Charities like Acacia are unsung heroes in the transformation of maternity services within Birmingham and Solihull's Local Maternity System. We couldn't provide the whole range of services without them. ”

David Melbourne, Deputy CEO Birmingham Women's and Children's NHS Foundation Trust July 2019

The year ahead

We are delighted that 2018-19 has been an incredibly successful 15th birthday year for Acacia. The impact of our work is far reaching and significant.

Our provision is being delivered in a challenging context: public sector cuts have contributed to gaps in mainstream provision with access thresholds increasing, and the profile of service users presents an ever-increasing level of complexity. It is therefore not surprising that we are seeing a significant number of service users who fall within the 'severe' category for depression and anxiety.

We remain true to our original vision. We are committed to supporting mothers and families affected by perinatal mental health issues. In the coming year, we will work towards improving our services by:

- Considering the needs and designing services for mothers that face the biggest barriers to support
- Creating a more tailored model of support for mothers from BAME backgrounds
- Increasing transparency and accountability in the work we do and the impact we achieve.



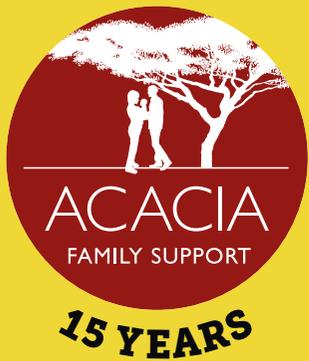
Thank you

Thank you a million times over to our dedicated teams of volunteers, staff and trustees. Quite simply there would be no Acacia without you.



“ The main thing I remember was feeling that finally someone cared, [volunteer] didn't shy away from talking about how low I was, she didn't judge, she just showed that she and others cared whether I was here or not, I was finally being taken seriously and that I was going to get some help. I was not alone. ”

“ It was good to talk to someone impartial, who wanted to help and listen and it helped me to sort some issues out in my head. ”



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With love and eternal gratitude for the life of Acacia co-founder **Emma Louise Borg** (26 September 1967 to 7 September 2018). Emma's Christian values and legacy will go on inspiring us and acting as a beacon to light the way for Acacia to continue to grow ever nearer to her goal: a world where no woman has to experience postnatal depression alone.

Thank you to all the funders who support our work, including:

