#

**Market Testing – Peer support, mild-moderate perinatal mental health services**

# Overview

The Council is reviewing its peer support service for mild-moderate perinatal mental health needs. The service is primarily aimed at delivering emotional and practical support to parents who may be experiencing mild-moderate anxiety, social isolation and/or depression, antenatally and in their infant’s first years of life (first 1001 days). The current service provision is due to end in September 2021.

**What is peer support?** Peer Support may be defined as the help and support that people with lived experience of a mental illness are able to give to one another. Peer support is distinct from other forms of social support in that the source of support is a peer, a person who is similar in fundamental ways to the recipient of the support; their relationship is one of equality.

It may be social, emotional or practical support but importantly this support is mutually offered and reciprocal, built on shared personal experience and empathy and allows peers to benefit from the support whether they are giving or receiving it.

Research has shown that peer-run self-help which works towards the individual's wellbeing and recovery, yields improvement in psychiatric symptoms resulting in decreased clinical input, larger social support networks and enhanced self-esteem and social functioning.

**What is helpful in delivering peer support?**

A review of the evidence[[1]](#endnote-2) from studies that have looked into the impact of peer support on PNMH indicate that women want to access peer support but need to have somewhere that is safe for them to be themselves, to talk openly about how they feel; somewhere for their voices to be heard. For the women in the studies, the search for a peer environment in which they could be honest about how they felt was an essential part of the search for understanding and validation. The importance of the most helpful type of peer support - which acknowledges their perinatal mental Illness and its associated expression – therefore, is central to women getting the most benefit from this.

Studies have looked at some key themes around peer support in the perinatal period.

**Social isolation**

Women across all the studies spoke of isolation, highlighting the difficulties this posed in terms of being able to benefit from peer support interventions and being instrumental in the likelihood of their developing depression. People they were in contact with (family, friends, and other mothers) could contribute to their feelings of disengagement and isolation because they did not share the same experiences of mental distress.

**Seeking validation through peer support**

Women wanted their feelings and experiences to be validated by others with similar experiences. Engaging generally with networks of other mothers didn’t always achieve this, leaving mothers with feelings of depression, unable to speak up and leading to continued problems.

**The importance of social norms of motherhood**

Women experienced intense feelings of being a ‘failure’ as a mother when their symptoms of depression prevented them from being able to live up to a standard they expected of themselves. The shame and embarrassment associated with failure was identified as a problem across all studies. Women therefore used a variety of different approaches to conceal how they were really feeling.

**Finding affirmation/a way forward: the impact of peer support**

Finding other mothers who had experienced similar mental distress in motherhood was considered a valuable part of the journey towards recovery. Feelings of sharing a common experience emerged within these new relationships, enabling the mothers to re-evaluate their own experiences and gain benefit from being understood by peers.

1. **Market testing**

The Council wishes to undertake soft market testing on the re-commissioning of these services, and therefore would welcome the views of providers on the questions set out below.

Interested parties will not be prejudiced by any response or failure to respond to this soft market testing and a response to this notice does not guarantee any invitation to participate in any future public procurement process that the Council may conduct.

This notice does not constitute a call for competition to procure any services for the Council and the Council is not bound to accept any proposals offered. The Council is not liable for any costs, fees or expenses incurred by any party participating in the soft market testing exercise. Any procurement of any services by the Council in due course will be carried out strictly in accordance with the provisions of the Public Contracts Regulations 2015.

Any responses provided will not be treated as commercially confidential, unless expressed by the providing party,and may be used by the Council in the final service specifications used for the contracts, but no organisation will be individually identified.

We would like to receive feedback on the following areas (see questions in section 5) and any other comments that you may have. Organisations will have the opportunity to ask clarification questions on the specification should a procurement process be undertaken.

Following this market testing exercise the Council intends, subject to governance to run a commissioning exercise, which would likely include the following key stages (see indicative timeframe in section 4).

1. **Indicative timeframe**

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| **Stage** | **Date** |
| Review of the current model and engagement with market and residents | January 2021 – March 2021 |
| Tender advert released | April 2021 |
| Deadline for tender | End of May 2021 |
| Presentation and dialogue/negotiation period  | June 2021 |
| Contract award | July 2021 |
| Commencement Date of Contract | October 2021 |

**Please note that these dates have not been finliased and are subject to change.**

1. **Market Questionnaire**

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| 1. What is your general level of interest in bidding for this contract? (Please briefly explain why below)
* High (very likely to bid)
* Medium (may bid)
* Low (unlikely to bid)
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| 1. What experience do you have in delivering peer led emotional and practical support with *parents*, please detail the benefits you have seen and the outcomes you have achieved?

Please include any examples of work you have delivered with parents/caregivers including work with mothers and fathers etc. |
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| 1. What is your understanding of the needs of pregnant women and parents with infants in Camden, and the prevalence of emotional, social and mental health issues within the cohort accessing peer support services?
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| 1. Please provide examples (from current or previous contracts) of successful mechanisms you have used to engage with vulnerable parents, and how you have supported them to access appropriate services within universal and specialist perinatal mental health provision? Do you forsee any barriers that would impact your ability to do this in Camden?
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| 1. What could service delivery look like? What could delivery be made up of? For example:
2. use of volunteers?
3. incorporating virtual interventions? (e.g. online groupwork or social/educational interaction opportunites using Zoom or MS Teams)
4. one-to-one/ groups?
5. something else?
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| 1. How will you ensure peer supporters have the relevant skills and training to deliver this type of work? What type(s) of initial and ongoing support could you offer to peer supporters?
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| 1. How will you ensure services are practically accessible to parents, how will you use appropriate locations close to Camden residents? E.g. children’s centres/ local community centre etc.
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| 1. What do you see as the key challenges and opportunities in delivering these services?
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| 1. In what ways do you deliver Social Value to communities, i.e. improvements in the economic, social and/or environmental well-being of the areas? Please explain what you have done previously or are currently doing in this area. How do you think you may be able to deliver Social Value as part of any future contract for these services?

Please see <https://www.socialvalueuk.org/what-is-social-value/the-principles-of-social-value/> for more information |
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| 1. How would you make sure that all diverse communities have equal access to these services? Is there anything that you are currently doing to promote equalities and diversity within any current contracts you have?
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| 1. Would you be willing to discuss this further? Please state your preference between a group workshop or meeting on a 121 basis.
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1. **General Information**

Following this market testing exercise Camden Council will consider options for developing the provision in question.

**Please return your completed questionnaire by 5pm on Friday 26th February 2021 to:**

Shema.begum@camden.gov.uk

1. Jones CCG, Jomeen J, Hayer M (2014). The impact of peer support in the context of perinatal mental illness: a meta-ethnography. Midwifery 30 (2014) 491-498 [↑](#endnote-ref-2)