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Interventions that prevent or reduce perinatal loneliness and its proximal determinants: a restricted scoping review

What is perinatal loneliness and why is it a problem?

Perinatal loneliness, which refers to loneliness experienced during pregnancy and up to two years post-birth, is linked to poor mental health, such as postnatal depression. New parents are at increased risk of loneliness, which adversely affects parental and infant health and well-being and is linked to an increased likelihood of parental mental illness. In the UK, perinatal mental illness is estimated to cost £8.1bn a year, predominantly due to lasting poor health and developmental consequences for children. Before this review, there was limited information about interventions that might be effective at reducing loneliness.

Types of Perinatal Loneliness

Emotional loneliness

- No one to share your feelings with.
- Afraid to share your feelings.
- Masking your difficulties.
- Not feeling listened to or understood.

Social loneliness

- Being in a 'different time zone' from friends/family.
- Making new friends takes time/is hard.
- Few social opportunities.
- Being physically alone.
- Few adult conversations.

Existential loneliness

- Feeling invisible, excluded or different.
- Identity changes (e.g. loss of work, sense of self, or changes to body).
- Lacking purpose.
- Feeling undervalued.
- Experiencing discrimination.

For more information: perinatal-loneliness.com

Promising interventions for perinatal loneliness that we identified when we carried out a literature review

Playgroups (n=3)
Groups where people with similar situations go for support.

Creative Health intervention (n=13)
Craft, walking, exercise, yoga, art, nature-based, music and singing interventions.

Awareness campaigns (n=1)
Campaigns on social media, poster campaigns, training videos that educate parents about loneliness.

Shared-identity support groups (n=19)
Groups where parents go with their babies and children to play and can potentially meet other parents.

Synthetic social support (n=12)
Support from peers or professionals (e.g. therapists or health visitors).

Multidisciplinary, holistic and place-based support (n=2)
Parents receive multidisciplinary support to overcome financial, cultural, structural, informational and psychological barriers to being connected.

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How did we do our review?

We conducted a restricted scoping review following the **Joanna Briggs Institute Methodology** to develop a categorisation of interventions and intervention-mechanisms to reduce perinatal loneliness. We included studies that described and/or evaluated interventions in published studies that intentionally or unintentionally reduced loneliness, or its proximate determinants, such as social connectedness and social support. We searched eight electronic databases for peer-reviewed academic papers published in any country describing or evaluating these interventions between 2013–2023. **Fifty studies were included**, from a range of countries including the UK, Europe, Asia, North America, Australia, New Zealand and Canada.

Key findings

The interventions were categorised into six 'types' following analysis of the support they delivered. Types included 1) synthetic social support, 2) shared-identity social support groups, 3) parent and baby groups, 4) creative health approaches, 5) holistic, place-based and multidisciplinary support, and 6) awareness campaigns.

We identified **five mechanisms** common across these intervention types that might help prevent or reduce loneliness and/or its proximal determinant.. Many interventions used all mechanisms and the mechanisms overlapped and were related to each other.

There were no studies that explored interventions for LGBTQ+ parents and few that included fathers. Very few were coproduced, or rigourously evaluated, highlighting priorities for future research.

How do interventions reduce perinatal loneliness?

Build connections with similar others
Parents often feel alone with their challenges. Meeting other people having similar experiences can help them realise they are not the only one with that experience. This may encourage them to seek support. For example, parents may meet others with similar health conditions or a shared culture. Connections can lead to friendships.

Offer meaningful activities for parents
Many parent and baby groups focus primarily on child development or well-being. New parents also need activities that are designed for their well-being, such as creative activities, mindfulness, or volunteering opportunities.

Support parents to normalise and accept their difficulties
Many people feel guilt or shame for finding the perinatal period challenging or unenjoyable. Many interventions encourage parents to realise finding pregnancy and parenting difficult and unenjoyable are normal and do not mean you are a bad parent.

Support parents to overcome their personal barriers to connection
Many parents face barriers to connection including financial, psychological and informational. Interventions work with parents to overcome their barriers either directly or indirectly through referrals.

A positive relationship with a professional or volunteer
Many people either have no one to support them, or have no one able to provide them with the support they need. Some interventions offer a connection to a trusted professional or volunteer to support them. This can include health or social care professionals, therapists, doulas and peer support workers.

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