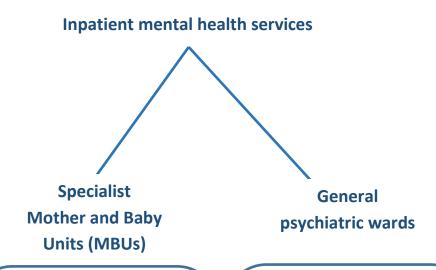
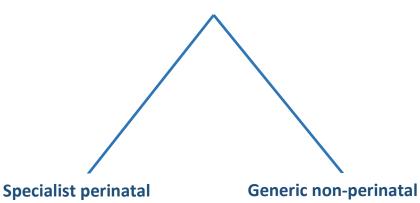
Diagram of key themes expressed regarding different types of mental health service



- Good collaboration with families, some support offered (though not enough)
- Families want e.g. more support with reuniting post-discharge
- Good at facilitating family visits
- But often far away for families
- Fragmentation of family unit, partners can't stay overnight etc.
- Mother/baby focus > hard for partners to 'fit in'

- Families must be proactive & persistent to be kept informed
- Not well set up for family visits
- Little in way of support offered for families
- Support not usually offered when partner or family member is left to look after baby singlehandedly during woman's admission

Community mental health services



- Signs they may be better equipped than generic services at working with families; a few examples of supporting families/relationships well
- But families not very involved/supported, feel overlooked
- Emphasis on mother/baby

- Families overlooked, often no 'space' for them – at appointments/home visits
- Marginalised, often not offered support themselves
- Focus on individual not family
- Small number of examples (e.g. in community teams offering longer-term support) of including families well in difficult circumstances, where service knows family well