

Addressing Maternal Mental Health in Colorado

Parent Possible Conference

April 4-6, 2017

Denver, CO



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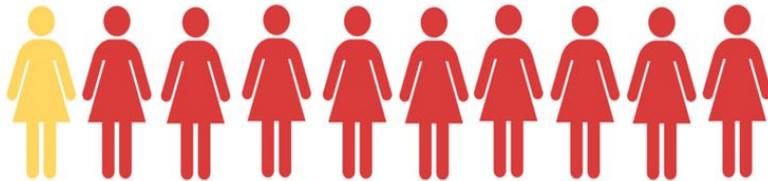
Colorado Department of Public Health & Environment

Session Objectives

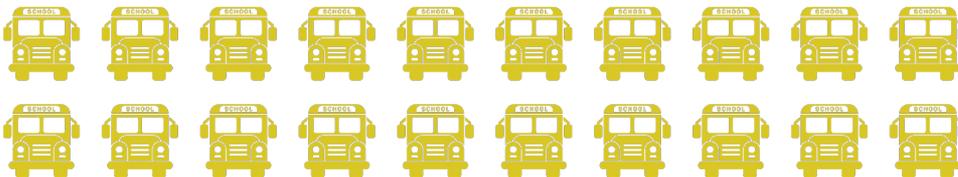
- Improve *understanding* of common types, causes, and risk factors for pregnancy-related mood disorders and its impact on early childhood development and maternal wellness;
- Improve *knowledge and skills* in identifying and addressing maternal mental health in community- and home-based settings; and
- Learn about available *tools, resources and strategies* to address maternal mental health.

Pregnancy-Related Depression (PRD)

- Most common complication of pregnancy.
- > 1 in 10: Colorado women affected by PRD.



- ~20,000: Children born to mothers who were depressed.



1 school bus = 1,000 children

Pregnancy-Related Depression (PRD)

77.6%: Mothers reporting “a health care worker talked with them about what to do if they felt depressed during pregnancy or after delivery.” State goal = 85.8% (2020)

Colorado PRAMS, 2012-14

23%: Colorado women of reproductive age reporting “they were told they had depression.”

Colorado BRFSS, 2013-15

13.3%: Women indicated “there was a time (past 12 months) they did not get needed counseling.”

Colorado Health Access Survey, 2015

30.3%: Pregnancy-related deaths attributed to suicide or accidental overdose.

Colorado MMR Program, 2004-13

Introductory Activity

In pairs:

Share an experience when you were concerned about the mental well-being of a pregnant woman or new mom.

- *What did you do?*
- *What do you wish you would have known?*
- *What resources would have been helpful to you as a home visitor?*

Maternal Psychological Complications

- Pregnancy-Related Depression (PRD)
- Postpartum depression with or without psychotic features
- Depression during pregnancy
- Implications:
 - *Interfere with attachment to newborn and family integration*
 - *May threaten safety and well-being of mother, newborn, and other children*
 - *Dirre need for increased awareness among providers and general public*
 - *Dirre need for increased access to resources, and resources themselves*

No Specific Etiology

There's no single cause of postpartum depression, but physical and emotional issues may play a role.

- **Physical changes.** *After childbirth, a dramatic drop in hormones (estrogen and progesterone) in the body may contribute to postpartum depression. Other hormones produced by the thyroid gland also may drop sharply – which can leave a new mother feeling tired, sluggish and depressed.*
- **Emotional issues.** *When a new mother is sleep deprived and overwhelmed, she may have trouble handling even minor problems. She may be anxious about her ability to care for a newborn. She may feel less attractive, struggle with her sense of identity or feel that she has lost control over her life. Any of these issues can contribute to postpartum depression.*

Risk Factors for Depression

Biological predictors

- Personal history or familial history of major or postpartum depression, gestational diabetes, history of moderate to severe premenstrual symptoms (PMS) or premenstrual dysphoric disorder (PMDD).

Situational stressors

- Unplanned or unwanted pregnancy, complications (either perceived or actual) in labor or delivery, difficulty with breastfeeding, sleep deprivation, infant health problems, and infant temperament.
- Lack of material support, such as food and housing, lack of social support, major life stressors and interpersonal violence

Co-occurring risk factors

- Substance or tobacco use, interpersonal or intimate partner violence.

Protective Factors for Depression

- Planned pregnancy
- Social support
- Positive parenting role models
- Co-parent involvement
- Parenting confidence
- Eating well, being active
- Adequate sleep
- Support of parenting decisions that align with a woman's cultural practices
- Support of woman's decision on whether or not to breastfeed
- Work policies that support breastfeeding and provide adequate maternity and paid sick leave

The Ripple Effect...

Left untreated, postpartum depression can interfere with mother-child bonding and cause family problems:

For mothers. *Untreated postpartum depression can last for months or longer, sometimes becoming a chronic depressive disorder. Even when treated, postpartum depression increases a woman's risk of future episodes of major depression.*

For fathers. *Postpartum depression can have a ripple effect, causing emotional strain for everyone close to a new baby. When a new mother is depressed, the risk of depression in the baby's father may also increase. And new dads are already at increased risk of depression, whether or not their partner is affected.*

For children. *Children of mothers who have untreated postpartum depression are more likely to have emotional and behavioral problems, such as sleeping and eating difficulties, excessive crying, and attention-deficit/hyperactivity disorder (ADHD). Delays in language development are more common as well.*

The “Baby Blues”

The “baby blues” usually fade on their own within a few days to one to two weeks. In the meantime, encourage the new mother to:

- Get as much rest as possible
- Sleep when your baby sleeps
- Accept help from family and friends
- Connect with other new moms (support groups, church groups, baby and me groups)
- Take the time to take care of yourself
- Avoid alcohol and recreational drugs, which can make mood swings worse.

“Baby Blues” Symptoms

Signs and symptoms of baby blues – which last only a few days to a week or two after the baby is born – may include:

- Mood swings
- Anxiety
- Sadness
- Irritability
- Feeling overwhelmed
- Crying
- Reduced concentration
- Appetite problems
- Trouble sleeping

Still Face Experiment



Ed Tronick (http://www.umb.edu/Why_UMass/Ed_Tronick), director of UMass Boston's Infant-Parent Mental Health Program. Copyright © 2007 ZERO TO THREE
<http://www.zerotothree.org>

Break (15 min.)

Tools, Strategies & Resources

Pair up with a partner for role play (Mom & Home Visitor):

Mom:

- Think of a mom with whom you've worked and respond to your Home Visitor and the screen from her perspective

Home visitor:

- Administer the [EPDS](#) (Edinburgh) with your mom partner
- Talk about results of the screening: Her concerns and yours
- Educate and empathize:
 - *This is common...*
 - *You are not to blame...*
 - *You are not alone...*
 - *Treatment works*

Tools, Strategies & Resources

Pregnancy-Related Depressive Symptoms Guidance

Lifestyle tool
(also in Spanish)



Others:

- Resources for Women and their Families
- Resources for Dads and Partners.
- Medication Algorithm
- Resources for Professionals.

HealthTeamWorks **Pregnancy-Related Depressive Symptoms Patient Resource**
For anyone who works with women of childbearing age or their children

Lifestyle Prevention and Treatment

Goals

1. _____
2. _____
3. _____
4. _____
5. _____

This guideline is designed to assist the clinician with the assessment and management of pregnancy-related depression. This guideline is not intended to replace the clinician's judgment or establish a protocol for all patients with a particular condition. For references, additional copies of the guideline, or patient documents go to www.healthteamworks.org or call (303) 441-7200 or 866-421-2050. FINAL 9/2013

Information and guidance for Colorado providers on addressing pregnancy-related depression:
<https://www.colorado.gov/cdphe/pregnancy-related-depression-resources-providers>

Tools, Strategies & Resources

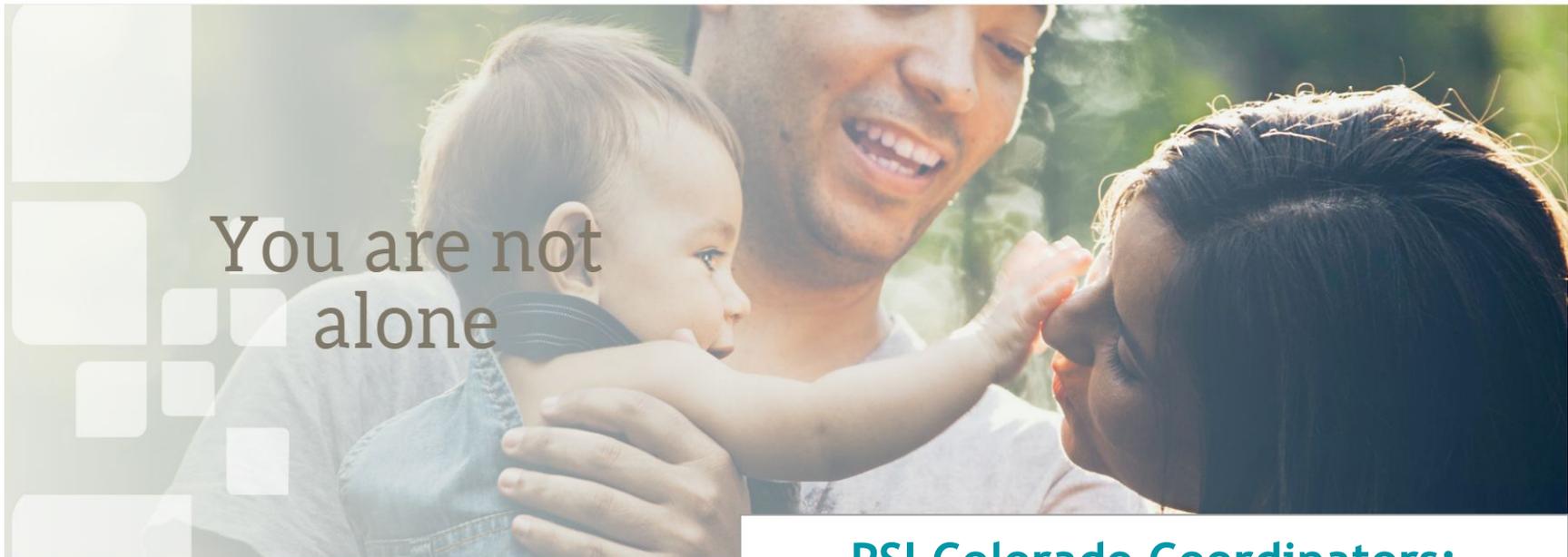
Postpartum Support International

<http://www.postpartum.net/>



Chat With An Expert PSI Blog - Trainings - News Donate Online To PSI En Español Contact Us **1.800.944.4773**

GET HELP JOIN US LEARN MORE FAMILY PROFESSIONALS RESOURCES ABOUT PSI 🔍



You are not
alone

PSI Colorado Coordinators:

Learn More

Essential info about perinatal mood & anxiety disorders, including risk factors, symptoms & treatments.

Get the facts about depression

Get Help

Get connected with the start down your road to

Find local resources

Boulder: Kate Kripke
Littleton: Mary Schroeter
Aurora: Melissa Lemire
Durango: Liv Mackenzie

Denver: Jen Harned Adams
Ft. Collins: Lia Closson
Colorado Springs: Jessica Strickland

Maternal & Child Health State Priority

Overarching Goal:

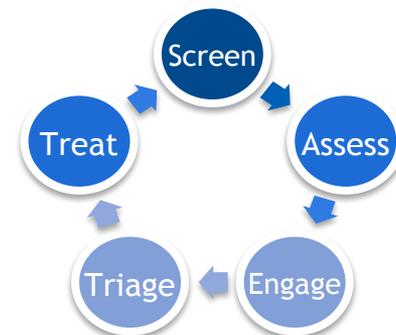
Reduce stigma associated with maternal mental health throughout Colorado to increase the number of women identified with pregnancy-related depression (PRD) who seek treatment.

Primary Strategies:

- 1) Develop and implement a public awareness initiative to reduce stigma.
- 2) Strengthen referral networks for providers to address PRD.



**LET'S TALK ABOUT THE
ELEPHANT IN THE ROOM**



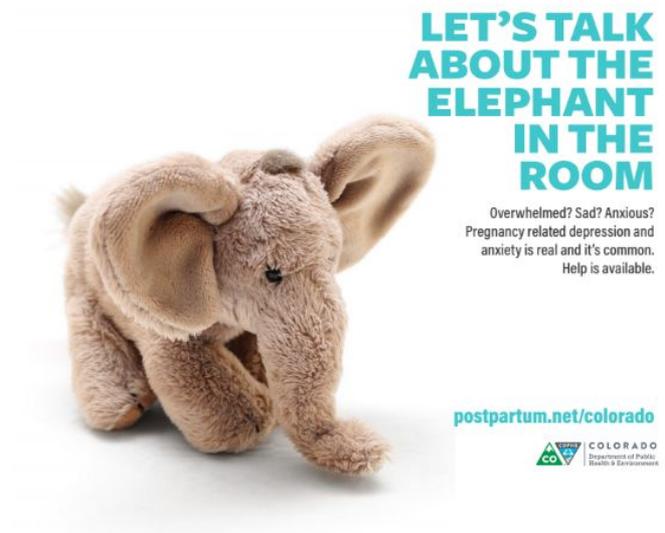
Colorado Public Awareness Campaign

Campaign Goals:

- 1) Improve awareness and knowledge about PRD;
- 2) Improve perceptions and attitudes toward help-seeking.

Target Audiences:

- Affected women
- Family, friends, spouses, etc...



Colorado Public Awareness Campaign



DON'T KEEP YOUR FEELINGS BOTTLED UP
You Are Not Alone. You Are Not To Blame. There Is Help For Pregnancy Related Depression And Anxiety.

postpartum.net/colorado | 1.800.944.4773



- Online educational resources for moms
- 24/7 Warm Line (bilingual)
- Regional maternal mental health experts
- Social media
- Community partners
- “Spokesmoms & spokesdads”



“At the beginning, I was just extremely happy,” said Erin Kenworthy. But Erin struggled with breastfeeding, exhaustion and the constant care. “And I kept telling myself that this is hard, but I should be able to do this...”

Campaign Resources

<https://www.colorado.gov/cdphe/pregnancy-related-depression> or
<https://drive.google.com/open?id=0B91a4raZ7fymV3BJazBxektKQWs>

COLORADO DEPARTMENT OF PUBLIC HEALTH & ENVIRONMENT
PREGNANCY-RELATED DEPRESSION & ANXIETY CAMPAIGN

TALKING POINTS

Pregnancy-Related Depression & Anxiety General Information

What is Pregnancy-Related Depression and Anxiety (PRD)?

- Pregnancy-related depression and anxiety occurs during pregnancy or after giving birth, including after a pregnancy loss.
- Pregnancy-related depression and anxiety is the most common complication of pregnancy.
- Pregnancy-related mood disorders include anxiety, obsessive-compulsive disorder (OCD), depression, post-traumatic stress disorder (PTSD), and psychosis.

Who is affected?

- Women are most frequently affected but it can also affect fathers, partners and close family members.
- Parents of every culture, age, income level and race can experience pregnancy-related depression and anxiety.
- **Nationally:** 1 in 7 women suffer from pregnancy-related depression and anxiety making it the most common complication of pregnancy.¹
- **Colorado:** Nearly 1 in 10 Colorado women reported symptoms of pregnancy-related depression and anxiety.² Research indicates this underestimates the true prevalence in Colorado in large part because the survey is based off of women's self-report as opposed to a clinical diagnosis, and women may have a sense of fear disclosing their symptoms.

What are symptoms of PRD?

- Mood disorders can occur any time during pregnancy up through baby's first birthday. They can also happen after a miscarriage, pregnancy loss, or even after adopting a baby.
- Symptoms differ for everyone and might include the following:
 - Feelings of anger or irritability
 - Lack of interest in the baby
 - Loss of appetite and trouble sleeping
 - Crying and sadness
 - Feelings of guilt, shame or hopelessness
 - Loss of interest, joy or pleasure in things you used to enjoy
 - Possible thoughts of harming the baby or yourself

What causes PRD?

- There is no one cause for pregnancy-related depression and anxiety.
- Women who develop depression or anxiety around childbearing have symptoms that are

**DON'T LET
HER KEEP
HER FEELINGS
BOTTLED UP**



Pregnant and new mothers need love and support too.

Pregnancy related depression and anxiety is common. Research also found out that she is not alone and she is not to blame.



LET'S TALK ABOUT THE ELEPHANT IN THE ROOM

Having a baby wasn't supposed to feel like this

Feelings of guilt, frustration and withdrawal are common among new moms. Having a baby is hard but support is available for you.

YOU ARE NOT ALONE. YOU ARE NOT TO BLAME. THERE IS HELP.

postpartum.net/colorado
 1.800.944.4773

YOU ARE NOT ALONE. YOU ARE NOT TO BLAME. THERE IS HELP.

Overwhelmed? Sad? Anxious? For women with pregnancy related depression and anxiety, each day can be a struggle. It's okay to ask for help.

Visit www.postpartum.net/colorado to find Colorado coordinators who can give you support and resources in your area.

Call 1.800.944.4773 for confidential, free and immediate support.

Lláme al número de teléfono gratuito para obtener recursos, apoyo e información gratuita.

postpartum.net/colorado
 1.800.944.4773



YOU ARE NOT ALONE

~ Social Media Images & Content ~ Posters ~ Flyers ~ Business Cards ~ Talking Points ~ Fact Sheets ~ Toolkit Guide ~ Technical Assistance Guide

Community Leads & Partnerships

Local public health agencies

- Denver, Larimer, Tri-County, Chaffee, Fremont, Logan, Morgan, Phillips, Sedgwick, Washington and Yuma counties

Early childhood partners

- Early childhood councils
- Colorado Project LAUNCH/Early Childhood Partnership of Adams County
- LAUNCH Together - Chaffee/Fremont, Denver, Jeffco, Pueblo
- Colorado Office of Early Childhood
- Bright by Text
- Colorado Association for Infant Mental Health

Others

- Colorado professional medical associations (AAP, ACOG, AWHONN, etc...), State Innovation Model, Accountable Care Collaborative, Colorado Children's Healthcare Access Program, foundations, health equity champions, two-generation initiatives, etc...

LET'S TALK
ABOUT THE
ELEPHANT
IN THE
ROOM



You are not
alone. You are
not to blame.
There is help for
pregnancy related
depression and
anxiety.

postpartum.net/colorado
1.800.944.4773

 COLORADO
Department of Public
Health & Environment

Campaign Phase II: April - August 2017

Closing Reflections

- What have I learned today?
- How can I use my new knowledge and understanding of pregnancy-related mood disorders to better work with pregnant or new moms & families?

Resources

- **Colorado Public Awareness Campaign Materials & Resources:**
<https://drive.google.com/drive/folders/0B91a4raZ7fymV3BJazBxektKQWs>
 - ↳ **Fact Sheets for Moms:**
<https://drive.google.com/drive/folders/0B91a4raZ7fymaU50cVUzMjBMZkE>
 - ↳ **Fact Sheets for Support Persons:**
<https://drive.google.com/drive/folders/0B91a4raZ7fymaU50cVUzMjBMZkE>
 - ↳ **Talking Points for Community Partners & Providers:**
<https://drive.google.com/drive/folders/0B91a4raZ7fymV3BJazBxektKQWs>
 - ↳ **Resource Toolkit Guide:**
<https://drive.google.com/drive/folders/0B91a4raZ7fymV3BJazBxektKQWs>
 - ↳ **Technical Assistance Guide:**
<https://drive.google.com/drive/folders/0B91a4raZ7fymV3BJazBxektKQWs>
 - ↳ **Posters, flyers, business cards, social media content:** Contact Phuonglan.Nguyen@state.co.us, 303-691-7810
- **Postpartum Support International (PSI):** <http://www.postpartum.net/colorado/>
- **2020 Mom** (Online training courses, resources, information on maternal mental health). <http://www.2020mom.org/>
- **Depression in Mothers - More than the Blues: A Toolkit for Family Service Providers** (English & Spanish):
<http://store.samhsa.gov/product/Depression-in-Mothers-More-Than-the-Blues/SMA14-4878>
- **Taking Care of Yourself Video for Pregnant & New Moms.** Early Childhood Partnership of Adams County (ECPAC). 2015. <https://www.ecpac.org/>

More Resources...

- **Project LAUNCH/Mental Health Consultation for Home Visitors**
 - Early Childhood Partnership of Adams County
 - Denver's Early Childhood Council
 - Jefferson Center for Mental Health
 - ECHO & Family Center Early Childhood Council/Chaffee County Early Childhood Council
 - Catholic Charities, Diocese of Pueblo
- **Pregnancy-Related Depression Website & Resources.** Colorado Department of Public Health & Environment:
<https://www.colorado.gov/pacific/cdphe/pregnancy-related-depression>.
- **Fussy Baby Network Colorado.** <http://www.fussybabynetworkcolorado.org/index.htm>.
- **Seizing New Policy Opportunities to Help Low-Income Mothers with Depression.** Center for Law and Social Policy. 2016.
<http://www.clasp.org/resources-and-publications/publication-1/Opportunities-to-Help-Low-Income-Mothers-with-Depression-2.pdf>.
- **Maternal Depression Can Undermine the Development of Young Children: Working Paper No. 8.** 2009. Center on the Developing Child at Harvard University.
<http://developingchild.harvard.edu/wp-content/uploads/2009/05/Maternal-Depression-Can-Undermine-Development.pdf>.
- **Pregnancy Risk Assessment Monitoring System (PRAMS).** Colorado Department of Public Health & Environment. <https://www.colorado.gov/pacific/cdphe/pregnancysurvey>



Thank You!

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