



ALLIANCE FOR INNOVATION
ON MATERNAL HEALTH








Perinatal Mental Health Conditions

Implementation Resources








Perinatal Mental Health Conditions Implementation Resources





Section	Resource	Description	Link
Readiness			
Readiness	Lifeline for Moms Perinatal Mental Health Toolkit <i>University of Massachusetts Medical School, 2019</i>	Despite the negative effects on maternal, obstetric, birth, offspring, partner, and family outcomes, perinatal mental health disorders often remain underdiagnosed, and untreated or under-treated. This toolkit provides actionable information, algorithms, and clinical pearls so that obstetric providers and practices can successfully address perinatal mental health conditions.	🔗
Readiness	Obstetric Provider Toolkit <i>MCPAP for Moms, 2014</i>	This is the MCPAP for Moms Obstetric Provider Toolkit, created to assist front-line perinatal care providers in the prevention, identification and treatment of depression, other mental health and/or substance use concerns in pregnant and postpartum women. This updated toolkit includes the following: Assessment and Management of Perinatal Mood and Anxiety Disorders Assessment and Management of Perinatal Substance Use Disorders (SUDs) Informational Material	🔗
Readiness	Behavioral Health Screening Tools <i>Wisconsin Department of Public Instruction</i>	There are a number of evidence-based, behavioral health screening tools available in the public domain. These are brief descriptions and links to additional information and how to access copies of the tools and the necessary accompanying materials.	🔗
Readiness	Trauma-Informed Care <i>MCPAP for Moms, 2021</i>	Trauma is a pervasive experience, especially in individuals with SUD. Trauma-informed care should be applied universally in all healthcare settings to create environments that promote recovery and safety and avoid inadvertent retraumatization.	🔗
Readiness	Provider Toolkit Table of Contents <i>MCPAP for Moms, 2019</i>	Screening Tools and Algorithms for Obstetric Providers - includes Depression, Bipolar Disorder and SUD. Also includes education for patients about how to find a primary care provider and how to talk to your HCP	🔗

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Readiness	<p>Improving Access to Maternal Health Care in Rural Communities: Issue Brief</p> <p><i>CMS, 2019</i></p>	<p>The recently enacted Improving Access to Maternity Care Act and Preventing Maternal Deaths Act. This issue brief was developed by CMS to provide background information on the scope of this problem and to focus attention on the need for national, state, and community-based organizations to collaborate on developing an action plan to improve access to maternal health care and improve outcomes for rural women and their babies. This includes access to comprehensive, seamless medical care with links to behavioral, economic, and social supports.</p>	
Readiness	<p>Link 1: Perinatal Mood and Anxiety Disorders (PMAD)</p> <p><i>Minnesota Department of Health</i></p> <p>Link 2: Postpartum Support and Care – Taking Care of Mothers After Birth</p> <p><i>Minnesota Department of Health, 2019</i></p>	<p>According to data from the Pregnancy Risk Assessment Monitoring System (PRAMS), approximately 10.9% of Minnesota PRAMS respondents self-reported experiencing postpartum depression between 2016-2020. The MN PRAMS data for 2016-2020 also revealed health disparities in self-reported postpartum depression experiences. More American Indian (23%) and African American (18%) respondents reported experiencing postpartum depression compared to White respondents (9%).</p> <p>Younger respondents (under age 20) are 2.7 times more likely to self-report experiencing postpartum depression compared to respondents above age 35.</p> <p>The percentage of low-income respondents who self-reported postpartum depression almost doubled that of high-income respondents. (Note: low-income is defined as income that falls below the 200% Federal Poverty Line)</p> <p>To learn more about postpartum support and care in Minnesota, read the report Postpartum Support and Care: Taking Care of Mothers After Birth (PDF)</p>	 
Readiness	<p>Perinatal Mood and Anxiety Disorders (PMAD)</p> <p><i>OC Health Care Agency, 2021</i></p>	<p>Screening Tools: EDS and PHQ in Spanish, Vietnamese, Korean, Farsi and other languages.</p>	
Readiness	<p>Orange County Perinatal Mental Health Toolkit</p> <p><i>First 5 OC, 2021</i></p>	<p>OC Perinatal Mental Health Toolkit</p>	


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Readiness	Perinatal Mood and Anxiety Disorders: Maternal Screening and Care Pathway <i>OC Health Care Agency, 2021</i>	OC PMAD Maternal Screening and Care Pathway	🔗
Readiness	Screening for Depression in Adults US Preventive Services Task Force Recommendation Statement <i>JAMA, 2016</i>		🔗
Readiness	Screening for Anxiety <i>WPSI, 2018</i>		🔗
Readiness	Toolkits & Apps <i>UMass Chan Medical School, 2021</i>		🔗
Readiness	Incorporating recognition and management of perinatal depression into pediatric practice <i>Pediatrics, 2019</i>		🔗
Readiness	Incorporating perinatal depression screening into your practice in 4 steps <i>AAP, 2022</i>		🔗
Readiness	Interventions to Prevent Perinatal Depression US Preventive Services Task Force Recommendation Statement <i>JAMA, 2019</i>	Perinatal depression can result in adverse short- and long-term effects on both the woman and child. The USPSTF reviewed interventions including counseling, health system interventions, physical activity, education, supportive interventions, and other behavioral interventions, and found convincing evidence that counseling interventions, such as cognitive behavioral therapy and interpersonal therapy, are effective in preventing perinatal depression.	🔗
Recognition			
Recognition	Link 1: Healthy Start <i>HRSA, 2022</i> Link 2: Mental Health Brochures <i>Healthy Start EPIC</i>	Communications is a key part of the day-to-day operations and the long-term sustainability of Health Start programs. On this page, the HS EPIC Center provides tools and ready-made templates to help you reach your communications goals. Depression and Anxiety During and After Pregnancy education for pregnant people and their support people.	🔗 🔗



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Recognition	Provider Toolkit Table of Contents <i>MCPAP for Moms, 2019</i>	Screening Tools and Algorithms for Obstetric Providers - includes Depression, Bipolar Disorder and SUD. Also includes education for patients about how to find a primary care provider and how to talk to your HCP	
Recognition	Depression During and After Pregnancy <i>HRSA, 2019</i>	Depression During and After Pregnancy - a resource for women, their families, and friends.	
Recognition	Importance of Social Determinants of Health and Cultural Awareness In the Delivery of Reproductive Health Care <i>ACOG, 2018</i>	Awareness of the broader contexts that influence health supports respectful, patient-centered care that incorporates lived experiences, optimizes health outcomes, improves communication, and can help reduce health and health care inequities. Although there is little doubt that genetics and lifestyle play an important role in shaping the overall health of individuals, interdisciplinary researchers have demonstrated how the conditions in the environment in which people are born, live, work, and age, play equally as important a role in shaping health outcomes. These factors, referred to as social determinants of health, are shaped by historical, social, political, and economic forces and help explain the relationship between environmental conditions and individual health. Recognizing the importance of social determinants of health can help obstetrician-gynecologists and other health care providers better understand patients, effectively communicate about health-related conditions and behavior, and improve health outcomes.	


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Recognition	<p>Clinical Notes-Maternal Social Determinants of Health Note</p> <p><i>HealthIT.gov</i></p>	<p>The Maternal Social Determinants of Health Note supports the aggregation of significant events, social problems and related health concerns, and plans of care derived from the visits over the course of a maternal care episode. It is a summary of the most critical information maternal care providers capture and share regarding the status of a maternal patient's social issues. The information is aggregated data from which the patient's interactions with healthcare and social services providers are captured.</p> <p>The Maternal Social Determinants of Health Note includes information such as structured evaluation of risk (e.g., PRAPARE, homelessness, AHC-HRSN screening tool, etc.) for any maternal health SDOH data related to conditions in which people live, learn, work, and play and their effects on health risks and outcomes; plan of care including social support interventions including but not limited to access to care; education; income; food stability; housing; neighborhood characteristics; safety; transportation security; violence/abuse preventions, ETOH, Smoking, Substance use disorder assessment and treatment drug abuse prevention and treatment; living arrangement; Social support involvement baby father involvement; etc.</p>	
Recognition	<p>Screening for Social Determinants of Health in Populations with Complex Needs: Implementation Considerations</p> <p><i>CHCS, 2017</i></p>	<p>Compared to other industrialized nations, the United States spends disproportionately less on social services, and more on health care. This is true despite evidence that social determinants of health (SDOH) — including income, educational attainment, employment status, and access to food and housing — affect an array of health outcomes, particularly among low-income populations. Individuals with unmet social needs are more likely to have difficulties self-managing chronic health conditions, have repeat “no-shows” to medical appointments, and be frequent emergency department users. With this understanding, providers are increasingly focused on strategies to address patients’ unmet social needs. This brief examines how organizations participating in Transforming Complex Care, a multi-site national initiative funded by the Robert Wood Johnson Foundation, are assessing and addressing SDOH for populations with complex needs. It reviews key considerations for organizations seeking to use SDOH data to improve patient care, including: (1) selecting and implementing SDOH assessment tools; (2) collecting patient-level information related to SDOH; (3) creating workflows to track and address patient needs; and (4) identifying community resources and tracking referrals.</p>	


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Recognition	OneCare Vermont: Self-Sufficiency Outcomes Matrix <i>CHCS, 2017</i>	This resource is a companion to the Center for Health Care Strategies' brief, Screening for Social Determinants of Health in Populations with Complex Needs: Implementation Considerations. The brief examines how organizations participating in Transforming Complex Care (TCC), a multi-site national initiative funded by the Robert Wood Johnson Foundation, are assessing and addressing social determinants of health for populations with complex needs. To download the brief and view additional assessment tools, visit www.chcs.org/sdoh-screening/ .	
Recognition	Protocol for Responding to and Assessing Patient Assets, Risks, and Experiences (PRAPARE): Used by the Redwood Community Health Coalition <i>CHCS, 2017</i>	This resource is a companion to the Center for Health Care Strategies' brief, Screening for Social Determinants of Health in Populations with Complex Needs: Implementation Considerations. The brief examines how organizations participating in Transforming Complex Care (TCC), a multi-site national initiative funded by the Robert Wood Johnson Foundation, are assessing and addressing social determinants of health for populations with complex needs. To download the brief and view additional assessment tools, visit www.chcs.org/sdoh-screening/	
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Response			
Response	Provider Toolkit Table of Contents <i>MCPAP for Moms, 2019</i>	Screening Tools and Algorithms for Obstetric Providers - includes Depression, Bipolar Disorder and SUD. Also includes education for patients about how to find a primary care provider and how to talk to your HCP	
Response	Perinatal Mental Health Resources <i>Illinois Doc Assist</i>	Webpage containing mental health hotlines and other resources for patients and providers.	

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Response	<p>Screening for Perinatal Depression</p> <p><i>ACOG, 2018</i></p>	<p>It is recommended that all obstetrician–gynecologists and other obstetric care providers complete a full assessment of mood and emotional well-being (including screening for postpartum depression and anxiety with a validated instrument) during the comprehensive postpartum visit for each patient. If a patient is screened for depression and anxiety during pregnancy, additional screening should then occur during the comprehensive postpartum visit. There is evidence that screening alone can have clinical benefits, although initiation of treatment or referral to mental health care providers offers maximum benefit. Therefore, clinical staff in obstetrics and gynecology practices should be prepared to initiate medical therapy, refer patients to appropriate behavioral health resources when indicated, or both.</p>	🔗
Response	<p>Perinatal mood and anxiety disorders, serious mental illness, and delivery-related health outcomes, United States, 2006–2015</p> <p><i>BMC Women's Health, 2020</i></p>	<p>National estimates of perinatal mood and anxiety disorders (PMAD) and serious mental illness (SMI) among delivering women over time, as well as associated outcomes and costs, are lacking. The prevalence of perinatal mood and anxiety disorders and serious mental illness from 2006 to 2015 were estimated as well as associated risk of adverse obstetric outcomes, including severe maternal morbidity and mortality (SMMM), and delivery costs. The study was a serial, cross-sectional analysis of National Inpatient Sample data. The prevalence of PMAD and SMI was estimated among delivering women as well as obstetric outcomes, healthcare utilization, and delivery costs using adjusted weighted logistic with predictive margins and generalized linear regression models, respectively.</p>	🔗
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Reporting & Systems Learning			
Reporting & Systems Learning	<p>How-to Guide: multidisciplinary Rounds</p> <p><i>IHI, 2022</i></p>	<p>With multidisciplinary rounds, disciplines come together, informed by their clinical expertise, to coordinate patient care, determine care priorities, establish daily goals, and plan for potential transfer or discharge.</p>	🔗

Reporting & Systems Learning	<p>Perinatal Mental Health Task Force: Integrating Care Across a Pediatric Hospital Setting</p> <p><i>Pediatrics, 2021</i></p>	<p>Perinatal mood and anxiety disorders (PMADs) are the most common complication of childbirth, with suicide a leading cause of postpartum deaths. PMADs are associated with poor maternal, infant, and family outcomes. Identification and early intervention are imperative for successful treatment. This case study describes the implementation and outcomes of a multidisciplinary Perinatal Mental Health Task Force ("Task Force") at one urban academic children's hospital that was created to promote systems change and health care policy solutions for improved identification and treatment of PMADs. Using the social ecological model as a framework, the Task Force addressed care at the individual, interpersonal, organizational, community, and policy levels. The Task Force applied lessons learned from division-specific screening initiatives to create best practices and make hospital-wide recommendations. This foundational work enabled us to build community bridges and break down internal barriers to shift our pediatric hospital toward prioritizing perinatal mental health. As a result, screening expanded to multiple hospital locations and became a hospital corporate goal, the Perinatal Mental Health Screening Tool Kit was created and disseminated within the community, Task Force members testified in governmental hearings and joined national organizations to inform policy, and Task Force and community collaborations resulted in significant grant funding. Lessons learned have been disseminated nationally. Moving forward, we aim to expand our program and partnerships to ensure that caregivers of infants receive appropriate mental health support to strengthen family well-being. The Task Force can serve as a model for advocates looking to expand and integrate PMAD care.</p>	
Reporting & Systems Learning	<p>Provider Toolkit Table of Contents</p> <p><i>MCPAP for Moms, 2019</i></p>	<p>Screening Tools and Algorithms for Obstetric Providers - includes Depression, Bipolar Disorder and SUD. Also includes education for patients about how to find a primary care provider and how to talk to your HCP.</p>	

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Respectful, Equitable and Supportive Care			
Respectful, Equitable & Supportive Care	<p>Respectful Maternity Care and Maternal Mental Health are Inextricable Linked</p> <p><i>New Security Beat, 2021</i></p>	<p>Much is still unknown about the connections between respectful maternity care and maternal mental health outcomes, said Patience Afulani, Assistant Professor at the University of California, San Francisco. Nevertheless, existing research indicates that women who have negative birth experiences are at higher risk of developing post-traumatic stress disorder, postpartum depression, and other perinatal mental health issues. "When women are treated in a way that is responsive to their needs, their preferences, and values; when providers are compassionate and respectful and supportive, a woman feels engaged in their care," she said. "They feel satisfied. They feel valued. They feel empowered, which promotes positive emotional health." There is a complex "cyclic relationship" between respectful maternity care and maternal mental health, said Afulani. For example, due to provider discrimination, women with pre-existing mental health issues may be more likely to have negative birth experiences. Negative birth experiences may also deter women from seeking care in the future, making it less likely that mental health issues will be properly identified and addressed, she said.</p>	
Respectful, Equitable & Supportive Care	<p>Racial Disparities in Perinatal Depression Screening Addressed in Recent Study</p> <p><i>MGH Center for Women's Mental Health, 2020</i></p>	<p>The importance of screening is well understood in the public health literature, and growing attention is being given to disparities in delivery of care and their relationship to worsened outcomes in racial and ethnic minorities, and those with other minority statuses. For example, a 2016 meta-analysis of studies of mammography found Black and Hispanic women had significantly lower odds of utilizing screening mammography compared to their white counterparts. This is critically important, as African-American patients are both more likely to be diagnosed at later stages of breast cancer and 42% more likely to die of breast cancer than white patients. These findings and those from studies in other areas of medicine and public health give rise to the question: do disparities exist in perinatal screening for PMADs, in regards to race and other personal factors?</p>	
Respectful, Equitable & Supportive Care	<p>Suffering in Silence: Mood Disorder Among Pregnant and Postpartum Women of Color</p> <p><i>CAP, 2017</i></p>	<p>Women of color experiencing perinatal mood disorders often suffer in silence and lack access to mental health care. Mental health stigma must be dismantled and key interventions implemented at the policy and community levels.</p>	

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Respectful, Equitable & Supportive Care	<p>Tackling Maternal Health Disparities: A Look at Four Local Organizations with Innovative Approaches</p> <p>National Partnership for Women & Families, 2019</p>	Maternal health disparities have many causes, but disparate social conditions and a lack of prenatal care or substandard maternal care are often key factors. Community-based maternal care models can help to narrow the disparities in maternal health outcomes by providing expanded prenatal, childbirth and postpartum support that is respectful and culturally relevant to at-risk women. These models may also focus on breastfeeding and parental development. This issue brief highlights four programs from across the country, examines the importance of community-based maternal care models and offers recommendations for supporting and expanding them	
Respectful, Equitable & Supportive Care	<p>Respectful Maternity Care Implementation Toolkit (RMC-IT)</p> <p>AWHONN, 2022</p>	Respectful Maternity Care (RMC) is an approach to care that emphasizes the fundamental rights of women, newborns, and families, promoting equitable access to evidence-based care while recognizing unique needs and preferences (Shakibazadeh et al., 2018). Attitudes and behaviors of health care providers are entrenched in cultural norms, and implicit and explicit bias may cause unintended harm during patient interactions (Howell et al., 2018). These factors may lead to harmful consequences and place patients at greater risk for not receiving appropriate attention to address individual concerns or quality of care, specifically in the intrapartum and postpartum periods (Levine & Lowe, 2015; Miller et al., 2016; Saluja & Bryant, 2021). The Respectful Maternity Care Implementation Toolkit provides you with the tools and resources you need to implement the 10-Step “C.A.R.E. P.A.A.T.T.H.” within your organization. Make the commitment today to provide Respectful Maternity Care to every patient, every interaction, every time!	
Respectful, Equitable & Supportive Care	<p>NHSA-AIM CCI Racial Equity Learning Series (RELS)</p> <p>NHSA, 2022</p>	Over 800 women and birthing persons in the United States die annually, due to pregnancy-related complications. Black and Native American women are three times more likely to die from these complications within one year of giving birth. This video is a compilation of equity-focused resources that are applicable to individuals and organizational teams, to deepen the understanding of the devastating effects of racism and explore strategies to combat racism from the waiting room to the board room, and beyond.	

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Respectful, Equitable & Supportive Care	Respectful Care eModules ACOG, 2022	Significant racial health disparities have been proven to exist in birth outcomes year after year and the data prove that racial inequities in care are harmful to patients. These courses will provide a breadth of knowledge that will help clinicians more effectively offer respectful care in obstetrics, gynecology, and overall patient health.	

These materials were developed with support from the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of a cooperative agreement with the American College of Obstetricians and Gynecologists under grant number UC4MC28042, Alliance for Innovation on Maternal Health. The contents do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit HRSA.gov.

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