

Feelings in Motherhood:

A Primary and Secondary Prevention Strategy to Address the Social Determinants of Health and Health Equity of Women and Their Families who may be affected by Perinatal Mood and Anxiety Disorders

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- Amy Larsen, RN, MSN, PHN, IBCLC
- Misty Wright, RN, PHN, MSN



[1]

Conflict of Interest

- Nothing to Disclose
- Contact Information:
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[2]

Objectives

- Describe the history of Perinatal Mood and Anxiety Disorders in Riverside County and need identified to develop a Primary and Secondary Prevention system for local Riverside County CPSP OB/GYN offices
- Explain the development of the “Feelings In Motherhood” flipchart and its components
- Describe evaluation results of training provided:
 - Local CPSP OB/GYN offices and Community Providers
 - State of California CPSP Providers
- Discuss evaluation results of CPSP Quality Assurance Visits after training

[3]

History of Inland Empire Maternal Mental Health Collaborative

- 2009 Death of Garrison Burchett caused by his mother
- Mother diagnosed with postpartum psychosis and convicted of murder
- Group of Community Members committed to advocating and educating the community about Maternal Mental Health Disorders (MMHD)
- MMHDs occur during pregnancy and up to one year after delivery
- This includes: Baby Blues, Depression, Anxiety, Obsessive Compulsive Disorder, Postpartum Stress Disorder (PTSD) and Psychosis

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Problem Identified

- 2016 Annual Statewide CPSP Coordinators Meeting
- Training PMAD education and screening for all OB/GYN offices
- No universal system to provide screening during pregnancy and postpartum
- Inspired all coordinators to find tools or useful education to implement with their providers
- Three PHNs began researching educational materials and tools.
- No 1 -1, user friendly, layman's level educational tools were found
- Idea! - Flip chart concept was developed

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Amy Larsen's Background

- Master's in Nursing - Developed SMILE support group program for Master's Thesis
- Certified through Postpartum Support International in Maternal Mental Health Disorders (MMHD)
- Assistant Nurse Manager Nurse-Family Partnership - continue to work with women with MMHD's and provide training for staff.
- Active member of Inland Empire Maternal Mental Health Collaborative

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Deja's Background

- Active member of Inland Empire Maternal Mental Health Collaborative
- Comprehensive Perinatal Services Program Coordinator for Riverside University Health System- Public Health.
- Oversees CPSP in 80 OB/GYN clinics
- Misty Wright PHN worked along side with Amy and Deja developing this tool
- Misty has a background in Labor/Delivery and Postpartum.

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Key Players

- Met with management to have the idea approved
- Gathered our information on the topic from reputable organization called Postpartum Support International
- World renown organization known for its expertise in:
 - Training and educating professionals and volunteers in PMADs
 - Supporting women, men and families experiencing PMADs

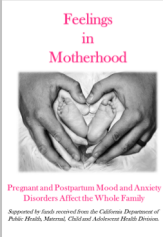
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Development of Flip chart

- Created a prototype flipchart with organized sections and accompanying educational handouts
- Flip chart and handouts were translated in Spanish by County Certified Translator - J.C. Avila, RN, MSN
- Reviewed for additional edits and funded by the California Department of Public Health, Maternal, Child and Adolescent Health Division

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Feelings in Motherhood



**Feelings
in
Motherhood**

Pregnant and Postpartum Mood and Anxiety
Disorders Affect the Whole Family

Approved by funds received from the California Department of
Public Health, Maternal, Child and Adolescent Health Division



**Sentimientos en La
Maternidad**

Los trastornos del estado de ánimo y la
ansiedad durante el embarazo y el
posparto afectan a toda la familia

Aprobado por fondos recibidos del Departamento de Salud
Pública, División de Salud Maternal, Infantil y Adolescente de
California

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Introduction

- Moms may start to feel changes in their emotions anytime during the pregnancy and up to 12 months after they have their baby.
- It is normal for moms to have high hormone levels during a healthy pregnancy. 24 hours after delivery, hormone levels drop back to where they were before becoming pregnant.
- Moms may feel different emotions during these times that can be from changes in hormone levels, uneven body chemicals, or simply from things happening in a mom's life.
- Moms can feel more sensitive and have mood swings that are high and low.
- Moms need to know when they may need help, so let's review some common things to watch for during and after pregnancy.

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Baby Blues

How Many Moms...

- About 8 out of 10 moms get "baby blues" which are mild mood swings and crying because of the stress of caring for a new baby and hormonal changes in your body.

What are the things to watch for?

- Feeling worried
- Feeling unhappy
- Feeling tired or low on energy

What to do?

- Baby blues are normal and no treatment is needed. Baby blues can last up to 2-3 weeks after you have your baby.
- This is an important time to ask for support from your friends and family.
- If it does not go away or you are not able to care for yourself and your baby, you may have something more serious and need treatment.

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Depression

Depression is the most common problem during and after pregnancy.

How Many Moms...

- About 2 out of 10 moms get depression during pregnancy and/or after they have their baby.

What are the things to watch for?

- Feeling angry or irritable
- Lack of interest in the baby
- Changes in appetite
- Sleeping too much or not enough
- Crying and sadness
- Feelings of guilt, shame, or hopelessness
- Loss of interest or pleasure in things you used to enjoy
- Possible thoughts of harming the baby or yourself
- These things can start during pregnancy or during the first year after you have your baby

What to do?

- Depression can be treated.
- If these things are happening or you experience them in the future, please tell your doctor right away.

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Anxiety

How Many Moms...

- About 1 out of 10 moms get anxiety during pregnancy and/or after they have their baby.
- Moms can have anxiety alone or with depression.

What are the things to watch for?

- Constant worry
- Feeling that something bad is going to happen
- Unable to stop anxious thoughts that are in your mind
- Changes in appetite
- Sleeping too much or not enough
- Not able to sit still
- Dizziness, hot flashes, and nausea
- Serious things are feelings of panic and chest pain
- These things can start during pregnancy or during the first year after you deliver your baby

What to do?

- Anxiety can be treated.
- If these things are happening or you experience them in the future, please tell your doctor right away.

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Obsessive Compulsive Disorder (OCD)

How Many Moms...

- About 3 out of 100 moms will get obsessive compulsive disorder.

What are the things to watch for?

- Scary images and thoughts that keep happening such as the thought of hurting your baby
- These thoughts can come out of nowhere and are not in your control
- Always feeling like you have to do certain things such as: cleaning, checking, counting, or reorganizing things over and over again
- Feeling very worried about these thoughts or behaviors
- Fear of being left alone with the baby
- Being overly protective of the baby
- Moms with obsessive compulsive disorder know that their thoughts are strange and are not likely to act on them

What to do?

- OCD can be treated.
- If these things are happening or you experience them in the future, please tell your doctor right away.

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Postpartum Stress Disorder

How Many Moms...

- About 9 out of 100 moms get postpartum post-traumatic stress disorder (PTSD).
- This type of stress is related to problems from a difficult delivery of the baby or if the mom experienced previous abuse in her life.

What are the things to watch for?

- Repeating thoughts about what happened during the delivery or abuse
- Flashbacks or nightmares
- Avoiding people, places, and/or things that remind you of the delivery or abuse
- Anxiety
- Unable to sleep
- Serious things are feelings of panic and chest pain
- Feeling isolated and that you don't belong

What to do?

- Postpartum PTSD can be treated.
- If these things are happening or you experience them in the future, please tell your doctor right away.

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Psychosis

How Many Moms...

- Psychosis is rare; it happens to about 1 or 2 moms out of 1,000.

What are the things to watch for?

- Delusions- you strongly believe something that is not true such as; you believe that God told you to harm your baby
- Hallucinations- you see or hear things that are not there such as; you see and/or hear angels in your house
- Feeling very irritated
- Not able to sit still or pay attention
- Not able to sleep
- Paranoid or suspicious
- Rapid mood swings
- Not able to talk and share your feelings
- These things usually start two (2) weeks after you deliver your baby

What to do?

- Psychosis can be treated, however, it is an emergency. Please call 9-1-1 immediately.
- If these things are happening or you experience them in the future, please tell your doctor right away.

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Tips on Staying Well

- Please don't be afraid to ask for help, you are not alone. These changes are common and can be treated.
- Get support from family and friends.
- Dads can have emotional changes too, and may need help and treatment. It is important to be there for each other.
- Talk to a counselor or doctor who understands what you are going through.
- Don't give up! It may take more than one try to get the help and treatment you need.
- Join a support group in your area or online.
- Keep active by walking, or any exercise that makes you feel better.
- Try to sleep for at least four (4) hours at one time each day; this will help you to think clear and feel like yourself.
- Rest when your baby rests.
- Eat a healthy diet every day.
- Drink eight (8) glasses of water every day.
- Keep taking your prenatal vitamins every day.

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Staff Instructions

Staff Instructions Only

- This section will guide you with tips how to talk to your patient.
- How to screen your patient with an approved tool.
- How to know when to refer her for further care.
- This section is not to be shared with the patient.

How to Talk to Your Patient

- Don't be afraid to ask sensitive questions. Most moms feel relieved when they talk about their feelings.
- Don't try to talk her out of how she feels such as saying, "Things aren't that bad." You should be happy that you are pregnant, or "You are fine and just think bigger thoughts." These kind of comments can make the mom feel like she is not a good mom leading to increased feelings of guilt and shame. Moms will often not open up once they feel this way.
- It is very important to be aware of your body language and facial expressions. Maintain good eye contact, face the patient, and really listen to what she has to say.
- Try to stay neutral and treat this like you would any other OB/GYN educational topic.
- Remember, if you are comfortable with the discussion, the mom will sense that, and be more open with you.

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Staff Instructions

Why Screen?

- Moms are most vulnerable to perinatal and emotional problems during pregnancy and the first 12 months after delivery. In fact, postpartum depression is the most under diagnosed OB/GYN complication in the United States.
- The consequences to moms and families who are not screened and treated for emotional stress and perinatal mental health disorders are significant. These include lack of bonding between mother and baby leading to developmental delays, lack of effective communication in families which leads to family breakdown and instability within the home. Worst case scenarios children are abused and/or neglected, removed from the home, and/or a family can occur.
- You can make a huge difference in a family's life by taking the time to screen and identify moms who may need treatment for a perinatal mental health disorder (depression, anxiety, obsessive compulsive disorder, postpartum post-traumatic stress disorder or psychosis).

Screening Tools

Tools

- Both the Edinburgh Perinatal Depression Screening Tool (EPDS) and Patient Health Questionnaire (PHQ-9) are approved to use in the perinatal population.
- Both are free, translated into many languages, and easy to complete.
- EPDS addresses the anxiety component of perinatal mental health disorders as well as depressive signs and suicidal thoughts.
- PHQ-9 does not have the anxiety component but includes suicidal thoughts.

Web link for tools

- <http://www.postpartum.net/professionals/professional-tools>

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Staff Instructions

Timing - When to Screen

- First prenatal visit
- At least one time in the second trimester
- At least one time in the third trimester
- First postpartum OB/GYN visit
- 6 week postpartum OB/GYN visit
- Repeat screening after delivery at 6 and/or 12 months at OB/GYN, Pediatric, or Primary Care settings
- 3, 9, 12 months at Pediatric visits

How to Score Your Tool

- EPDS or PHQ-9 is considered **positive** if the total score is 10 or more.
- A positive score means a mom is at high risk for emotional stress and/or a perinatal mental health disorder.
- EPDS or PHQ-9 is considered **negative** if the total score is 9 or less.
- If the mom's score is 9 or less, continue to follow the tool screening schedule. However, it is very important to check the **last question** of each tool which asks about suicidal thoughts. If the mom states that she is having suicidal thoughts **at all**, then her screen is considered **positive**.

What to do with positive screens?

- Notify the provider immediately for direction for a mental health referral or call 911 in the event of an emergency.
- Document in the chart, the screening, the notification of the provider, and all referrals/treatments that were made.

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Tips on Staying Well Fact Sheet

Tips on Staying Well Fact Sheet
For Mothers, Partners, Grandmothers, Family & Friends

Postpartum and perinatal mood and anxiety disorders affect the whole family. There are some things that might help you stay on top.

Taking Care of Your Home and Household

- Don't be afraid to ask for help, you are not alone.
- Get some rest, sleep, and food.
- Don't have too many visitors, and only visit help and support.
- It is important to be alone for some time.
- Don't stress too much about the things that others say or feel.
- Don't worry about the things that others say or feel.
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How Can I Get Help?

- Remember, you are not alone. There are people who can help you.
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Tips on Staying Well Fact Sheet
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How to Deal with Anger and Irritability

- Do your best to focus on the good and support in the best of the situation.
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Feelings in Motherhood Fact Sheet

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Community Training June 19, 2017

- Held at Parkview Hospital
- Hosted by Inland Empire Maternal Mental Health Collaborative
- Flip chart and screening (EDPS & PHQ-9) training
- Behavioral Health Community Partners – referral and treatment panel
 - Molina
 - IEHP
 - Wylie
 - Riverside University Health System-Mental Health
 - Borrego Health
 - Neighborhood Healthcare
 - WIC Breastfeeding and PMAD's Training

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Community Training

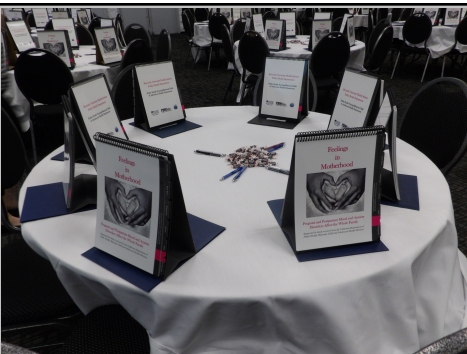
- Over 100 people attended the training.
- The evaluations showed an increase in knowledge and confidence in several areas:
 - How to educate clients about this sensitive subject
 - The spectrum of PMAD's
 - How and when to use screening tools
 - How to refer client to resources
- 91% made a commitment to use the flipchart in their office

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Community Training

- Over 50 percent of the audience learned something new about:
 - Baby Blues
 - Depression
 - Anxiety
- Over 75 percent of the audience learned something new about:
 - Obsessive Compulsive Disorder
 - Postpartum Stress Disorder
 - Psychosis
- 100 percent felt ready to use the EDPS or PHQ-9
- Over 96 percent of the audience learned something new about:
 - Inland Empire Mental Health Providers and Insurance Companies

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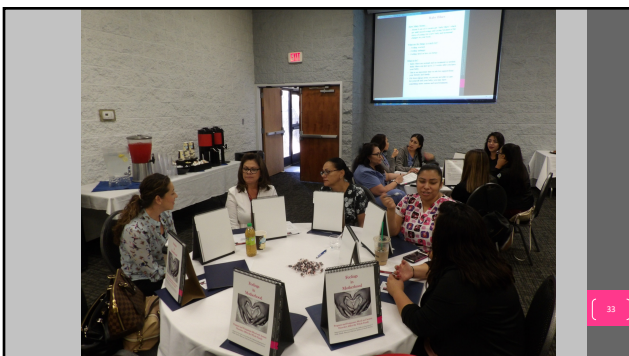












Amy Larsen, Deja Castro,
Misty Wright- PHNs who
designed the Flip Chart!



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Folsom CPSP Statewide Coordinators Meeting November 15, 2017

- 90 CPSP Coordinators participated in the training
- Many California Counties are implementing the Feelings in Motherhood program.
- San Bernardino County just got approval to print the flipcharts



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Post Training Survey 3 months after June Training

- The majority of offices are:
 - 89 Percent are using the flip chart weekly in their office
 - 83 Percent are using the flip chart during pregnancy and postpartum
 - 75 Percent read the flip chart with the patient versus having the patient review it alone
 - 75 Percent are screening with an approved tool both during the pregnancy and postpartum
 - 70 Percent are using the handouts designed to go with the flip chart
 - 61 Percent are using the referral resources we provided
 - Over 40% have made referrals due to issues discovered while using the screening forms and flip chart

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Quality Assurance Visits 3-12 Months Post Training

- 100 percent responded that they are using EPDS or PHQ-9 during pregnancy and postpartum as recommended in the Flipbook.
- Prior to Feelings Motherhood Flipbook training, nearly 40 percent of offices were not using EPDS or PHQ-9 in their offices for screening, 28 percent were using the tools only postpartum and 34 percent were using the tools at each trimester and postpartum.

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Flip Chart Availability

- Flip charts are free
- Please email alarsen@rivcocha.org , dcastro@rivcocha.org to obtain electronic copy of flip book and we will send you information about printing.

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We couldn't have done this without you!

Thank you to:

California Department of PH/MCAH
Hermia Parks, Director PHN/MCAH
Judy Atchison, Nurse Manager
Stephanie Bryant, Nurse Manager
Postpartum Support International
IEMMHC

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