

A photograph of two women laughing joyfully while walking on a paved path. The woman in the foreground is a Black woman with long braids, wearing a patterned top. The woman behind her is a white woman with blonde hair, wearing a red top. They are both smiling broadly. The background shows a railing and trees, suggesting an outdoor setting. The entire image is overlaid with a semi-transparent blue filter.

Mental Health Support for Pregnant and Postpartum Women

WELL *moment*

Better Conversations. Better Health.

AN EDUCATIONAL EVENT BY VHAN

Housekeeping

- Our goal is to have this be an interactive session, so please submit your questions throughout the presentation via the chat box.
- We will send an email of the recording and the presentation slides, along with links to resources discussed.
- We'd love to hear from you! If we don't cover something, or if your question isn't answered, contact us at memberinfo@vhan.com.

Today's Speakers



Laura Crosby, LPC/MHSP

Nashville Collaborative
Counseling Center



JaNina Wright

Doulas for Everyone & TN
Chapter of Postpartum
Support International



Jessica Young, MD

OB/GYN and
Addiction Medicine Specialist
Vanderbilt University Medical Center

Objectives

- Coping with depression and anxiety during and after pregnancy
- Managing previously diagnosed behavioral health conditions while pregnant
- How your family and friends can help support your behavioral
- Treatment, support and recovery for maternal addiction issues



Mental Health and Pregnancy

- What are perinatal mood and anxiety disorders?
- Why is diagnosis important?
- How are PMADs treated?
- Substance Use Disorder and Pregnancy
- Postpartum Substance Use Disorder
- What do you do if you are a loved one is struggling?

A common story



Perinatal Mood and Anxiety Disorders

Depression or anxiety that occurs during pregnancy or within a year of delivery

Common complication of pregnancy

Screening is recommended during pregnancy and postpartum

Pre-existing mental health disorders increase risk

Perinatal Depression

Most common

Effects 1 in 7

Maternal suicide is a leading cause of maternal mortality

Often goes unrecognized

Symptoms include trouble sleeping and eating, difficulty bonding with baby, feelings of guilt, sadness, anxiety, lack of interest

Perinatal Mood Disorders

Anxiety disorders

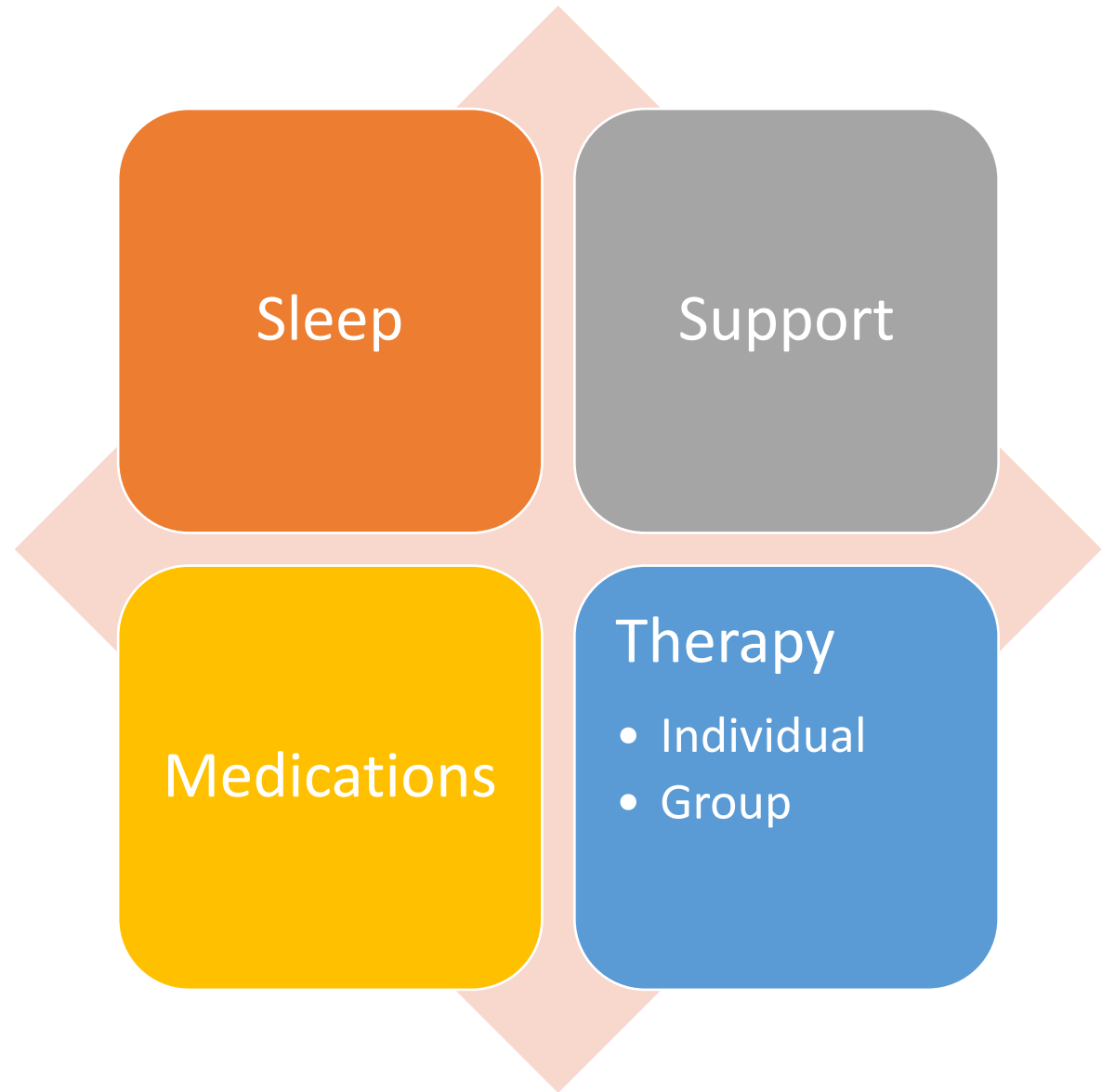
Obsessive Compulsive Disorders

Post Traumatic Stress Disorder

Exacerbation of bipolar disorder

Psychosis

Treatment



Medications

- Many psychiatric medications are safe in pregnancy
 - Antidepressants are well studied in pregnancy and safe for breastfeeding
- Not treating PMAD can increase risks
- Risks of medication for infant are typically low
 - Some can cause discontinuation symptoms after birth
 - Rare more serious complications
- Important to discuss risks and benefits of medication

Substance Use and Pregnancy

- Screening and education
- Referral to treatment
- Treatment types
 - Outpatient
 - Inpatient
 - Individual therapy
 - Group therapy
 - Medication Assisted Treatment

Postpartum Substance Use Disorder

High risk time for relapse

Some report that their use started after delivery

Protective factors removed

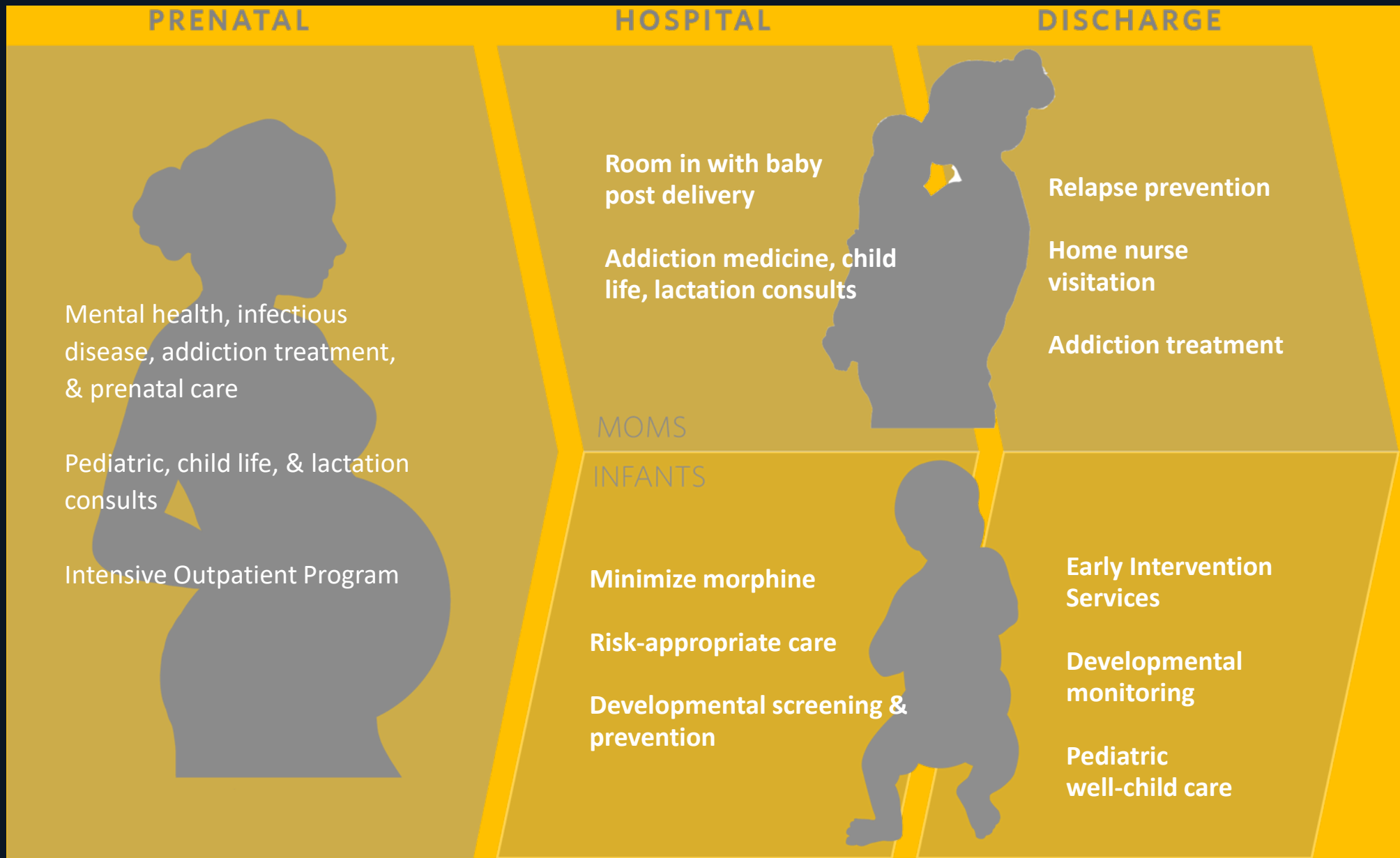
PMAD

Number one cause of pregnancy associated maternal mortality in TN

Firefly @ VUMC

- Integrate prenatal, postpartum, and well woman care with substance use disorder treatment to optimize health of mom and baby
- Build community for sustained recovery
- Provide support for healthy parenting
- Eliminate stigma around SUD
- End Health Disparities/Inequities in SUD treatment
- Connect woman and infants with community resources





Peer Recovery Specialists helping coordinate care & services
Mom engaged with Maternal Addiction Recovery Program
Services co-located in a single site of care

What to do if you or loved one needs help?

- Talk to your ob-gyn, PCP, or midwife
- Call PSI hotline
- National Suicide Prevention Hotline- 988
- Join a support group
- Substance Use Support- Redline 1-**800-889-9789**
- **Firefly 615-421-8000**

Postpartum Support International

In An Emergency

National Crisis Text Line:

Text HOME to 741741 from anywhere in the USA, anytime, about any type of crisis.

National Suicide Prevention Hotline
Call 988

Call for yourself or someone you care about; free and confidential; network of more than 140 crisis centers nationwide; available 24/7

Crisis Text Line

National Suicide Prevention

Call or Text our HelpLine

Call 1-800-944-4773 (4PPD)
English & Spanish

Text in English: 800-944-4773
Text en Español: 971-203-7773

Leave a confidential message any time, and a trained and caring volunteer will return your call or text. Our volunteers return messages during business hours. They will listen, answer questions, offer encouragement and connect you with local resources as needed.

PSI Help Line

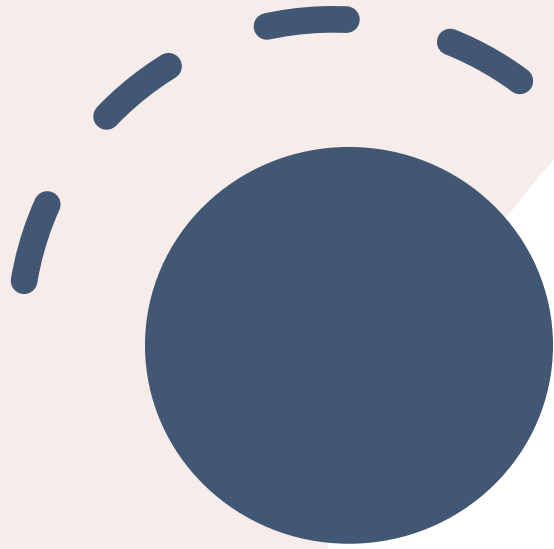
National Maternal Mental Health Hotline

Call or Text 1-833-943-5746
In English and Spanish

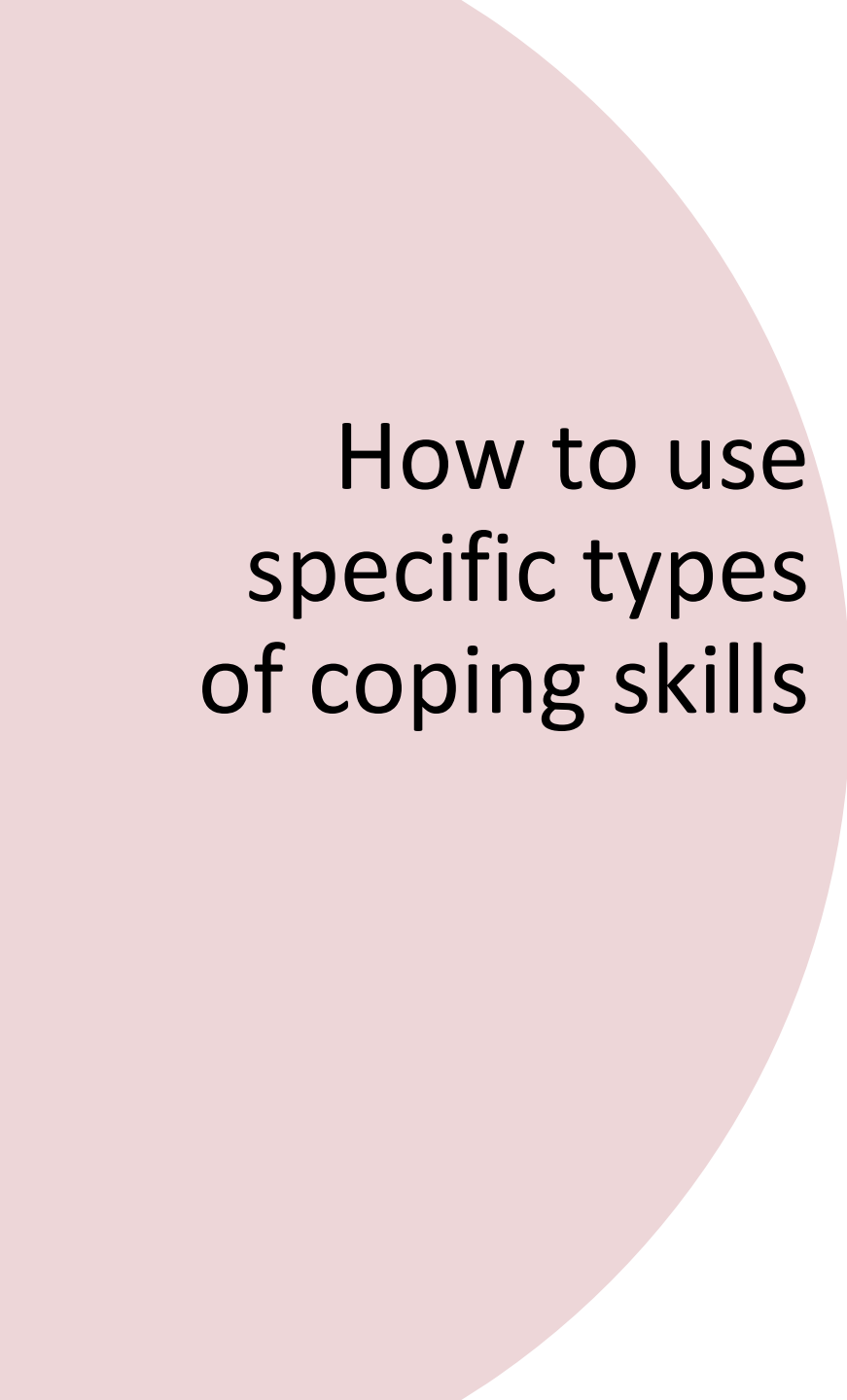
24/7, Free, Confidential Hotline for Pregnant and New Moms. Interpreter Services are available in 60 languages. (US Only)

TTY users can use a preferred relay service or dial 711 and then 1-833-943-5746.


National Maternal Mental Health ^
Hotline



Navigating early motherhood:
Coping skills and resources
available



How to use specific types of coping skills

- Our bodies need to regulate first, then we can examine our thoughts and what triggered us
 - Limbic system activation (can be triggered a lot in early motherhood)
- 

Coping skills

Grounding and mindfulness exercises

- In your environment, notice 5 things you can see, 4 things you can touch, 3 things you can hear, 2 things you can smell, and 1 thing you can taste
- Box breathing
- Practicing observing what's around you (describing something versus criticizing or judging)
- Mindful walks- Notice the ground beneath your feet, the breeze or temperature on your skin
- Instagram follow-[annatheanxietycoach](#)

Self-Compassion

- In moments of overwhelm, talking to self with compassion.
 - "I'm a good mom having a hard time right now. I can breathe through this. I can get through this. My child is loved and safe."
- Website- [Self compassion exercises](#)

Understanding our thinking

Thought distortions

- All or nothing thinking
- "Should" statements
 - Practice replacing "should" with "want"- i.e. I should be a better mom by now. I want to be a better mom by now.
 - This helps to make the statement goal-focused versus staying stuck in shame/guilt
- Comparison to others
 - negative impact of social media
- Minimizing
- Unrealistic expectations

Challenging our thinking and narrative

- How would we talk to a close friend in the same situation?
- What would a close friend say to me?
- Am I holding myself to an expectation that I wouldn't expect of others?
- What is prompting this thought? i.e. is this something that is really important to me or my baby?
- Am I only focusing on the worst case scenario? What are my resources if the worst was to happen?
- What is true and factual about this thought? What isn't true about this thought?

Self-care and setting boundaries

- Being realistic about time and how to care for self. Giving yourself 5-10 minutes of taking care of your needs (shower, taking a walk, drinking a hot cup of coffee)
- Asking others for support (Ja’Nina will go more into this!)
 - Anger/rage/resentment is a big indicator that more support is needed
- **Setting boundaries**
 - Understanding that you and your family are under no obligation to anyone

Resources

Therapy!

- Individual therapy
- What to expect
- Local- NCCC, ReadyNest Counseling

Support groups

- Postpartum Support International

Community

- Local moms groups
- Peanut app

Social media (my favorite Instagram follows)

- Drbeckyatgoodinside, destini.ann, thebalanceafterbaby, diaryofanhonestmom, 4th.trimester.wellness, mombrain.therapist

How Family and Friends Can Support

Postpartum Support International

Get Help

Call the PSI HelpLine:

1-800-944-4773

#1 En Español or #2 English

Text "Help" to 800-944-4773 (EN)

Text en Español: 971-203-7773

GET HELP

988 Suicide &
Crisis Lifeline

National Maternal
Mental Health Hotline (US only)

***The PSI HelpLine does not handle emergencies.**

People in crisis should call their local emergency number or the National Suicide Prevention Hotline at 1-800-273-TALK (8255).

www.postpartum.net



Please enter your questions into the chat box.

You can find additional resources at wellmoment.org.

Vanderbilt Health

Affiliated Network