

NEWS RELEASE



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Maternal Mental Health Work Group Report calls for more training, awareness and screening:

Report presented today to the Oregon House Human Services Committee

In Oregon, one in four new mothers reports symptoms of depression, either during or after pregnancy. Even though effective screening and treatment exist, most women with maternal depression are never diagnosed, and among those, only 35 percent receive adequate treatment, according to a new Maternal Mental Health Work Group Report.

Wendy Davis, Ph.D., knows this issue not only as an advocate and chairwoman of the work group, but also from personal experience. Sixteen years ago, she was a new mother of a baby boy. She struggled with anxiety and postpartum depression and, even though she is an experienced therapist, she was not aware of what was happening to her.

“I felt like I was failing, and I didn’t know I would get better. Although I took good care of my baby, I didn’t know how to care for myself. I needed help and I got it,” said Davis, director of Postpartum Support International.

Her experience led her to be an advocate for new laws to help new mothers and their families.

“I’ve learned that Oregon cares about new mothers and their families, and we’re putting that into action,” she said.

The House Human Services Committee, chaired by Rep. Carolyn Tomei, will be presented with the report today, Wednesday, Sept. 22. Committee members had pushed for more information and recommendations about maternal mental health disorders. The work group was created in 2009 because of the passage of House Bill 2666, sponsored by Tomei. The group is made up of representatives from public health, medical providers, researchers, childbirth professionals, community-based support organizations, insurance plans, vulnerable communities and diverse cultures.

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"There is a lack of provider education, public awareness, and access to affordable care for women suffering from these common, yet underreported issues," said Tomei. "Early recognition of risk factors and symptoms reduces adverse health outcomes for both the mother and child ultimately making Oregon families stronger."

The report focuses on women's mental health and how a mother's depression can put her children at risk for serious health, developmental, emotional, behavioral and learning problems that can persist for years. At least 15.6 million children in the United States live with an adult who had major depression in the past year. Regardless of race or age, low-income women are two to three times more likely to have depression than other mothers.

"We hope this report sheds light and makes changes in the way we identify and treat maternal mental health. This is not just important for mothers, but also for the health of their families," said Katherine Bradley, Ph.D., RN, administrator for the Office of Family Health, Oregon Public Health and a member of the work group.

The report details eight recommendations to improve maternal mental health in Oregon. The top three recommendations provide starting points:

1. **Provider training and support:** develop and fund a coordinated statewide initiative to train and support health care, public health, addictions, mental health and early childhood providers to understand, identify and address the mental health needs of pregnant, postpartum and post-loss women and families.
2. **Public awareness:** increase public awareness and understanding of the importance, symptoms, risk factors and stigma associated with maternal mental health disorders.
3. **Screening and assessment:** make screening and assessment for maternal mental health disorders available to all Oregon women during pregnancy, postpartum and post-loss.

Other recommendations include: ensuring culturally competent services are available; developing an integrated approach to maternal mental health across community and state levels; making sure the Oregon Health Plan covers a full range of screening, assessment and treatment and also eliminating barriers to Medicaid providers' billing; encouraging private health plans to promote screening and treatment for at least one year after a child's birth, or the loss of a child; and conducting ongoing monitoring and evaluation of maternal mental health status, needs and outcomes.

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For support, local resources or more information about maternal mental health issues, please call Postpartum Support International at 1-800-944-4PPD (4773) or visit www.postpartum.net.

To read the full report please visit:

www.oregon.gov/DHS/ph/ch/maternal_mental_health.shtml.