The Intersection of Public Policy, Public Health and the Nonprofit Sector:

*Massachusetts’ Postpartum Depression Initiative*

MA State Representative Ellen Story
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**National Incidence of Postpartum Depression (PPD)**

- 10 – 20% of general population
- 40 - 60% of women in poverty
- 26 - 32% of teen mothers

(Beck & Watson-Driscoll, 2006)

**Less than ¼ receive treatment**

Only 6% sustain treatment

Women do not disclose symptoms or seek care

Underutilization of Treatment

Unprepared providers, with limited resources

Poor Outcomes

www.chroniccare.org
MA Maternal Infant Mental Health Conference

- Held in 2008 at the Omni Parker House near the State House
- Over 200 attendees
- Nationally known speakers including:
  - Jeanne Watson Driscoll
  - J. Kevin Nugent
  - Ed Tronick

PPD Working Group

- Convened by the MA Department of Public Health in 2011
- Charged with advising the Department in the implementation of the PPD legislation
- Membership was diverse and included:
  - MA AAP
  - MA AHWOHN
  - MA Midwives
  - MA ACOG
  - MA Association of Family Practitioners
  - Legislators
  - Health Plans
  - Mental Health Providers
  - Academic/Researchers
  - Birth Hospitals
  - Community-based organizations
  - Title V programs

Resources Developed

- Standards for Effective PPD screening
- Recommendations for health care providers and health plans for reporting PPD screening data
- PPD Screening Tool Grid
- PPD Resource List & Bibliography
“My name is Linda and I am a survivor of severe postpartum depression… I hardly remember the first year of each of [my children’s] lives…”

GOAL
Screening to Treatment
Community-Based Perinatal Support Model

Objective:

To achieve optimal mental health outcomes for mothers by implementing a system of interventions that address barriers to care on the individual, provider, system and policy levels.

Sequencing of interventions

1. Coalition or taskforce
2. Professional training
3. Public education - de-stigmatizing PPD
4. Community resources and support groups
5. Resource and triage protocols
6. Advocacy and policy change
7. SCREENING is last!
National PPD Legislation

- New Jersey, 2006 with budget of $4.5 million
  - Required screening and education

  - Required screening Consultation and professional training for providers

- Iowa: Perinatal Depression Project
  - Expanded screening, early identification and referral
  - Professional Training
  - Referral tools

- Kentucky: Reach Out about Perinatal Depression Project through DPH
  - Required screening

- West Virginia, 2008

- Louisiana Perinatal Depression Project, Department of Health and Hospitals
  - Training for home visitors
  - Mental health treatment and case management

- Melanie Blocker Stokes MOTHERS Act, federal legislation
  - Education, support services and research

Why it worked

Assistance of large, varied, effective grassroots and institutional effort that was already underway

No legislative opposition; support of House Speaker

How we handled other opposition

Powerful hearing

Tenacity!
Massachusetts Legislation

• An Act Relative to Post Partum Depression (PPD): Chapter 313 of the Acts of 2010 was signed into law by Deval Patrick on August 19, 2010.

• Law authorizes the DPH to develop a culture of awareness, de-stigmatization, and screening for perinatal depression

PPD Legislative Commission

The PPD Commission is charged with the following tasks:

– An assessment of current research on postpartum depression;
– Review of current PPD screening policies and practices
– Assist MDPH in the development of educational materials, referral lists and designation of validated screening tools
– Assist MDPH is applying for federal funding
– File an annual report at the end of each state fiscal year

Accomplishments

• Increased media and public attention on PPD in Massachusetts
• Early educators trained by Commission mental health experts; other connections among diverse members
• Progress towards Medicaid coverage of screening
Membership of Massachusetts Special Legislative Commission on PPD
Members are appointed by the Governor

- Chairwoman State Representative Ellen Story and nine other legislators
  - From the House and Senate, including one minority party member from each branch
- Representatives from state agencies
  - DPH, DMH, Children and Families, Early Education and Care; Division of Insurance; Medicaid
- National Association of Social Workers, Mass. Chapter
  - Peggy Kaufman Jewish Family and Children’s Service
- Nurses United for Responsible Services
  - Dr. Janice Goodman Associate Professor, Mass. General Hospital Institute of Health Professions; private practitioner to pregnant and postpartum women
- Children’s Behavioral Health Initiative
  - Dr. Michael Yogman, Pediatrician and Chairman, Mass. AAP’s Child Mental Health Task Force
- Psychiatrist
  - Dr. Lee Cohen Director, Center for Women’s Mental Health, Mass. General Hospital
- Child Psychologist
  - Dr. Joshua Sparrow, Brazelton Touchpoints Center; Children’s Hospital, Head Start
- Nonprofit serving women suffering from PPD
  - Liz Friedman, Program Director, MotherWoman
- Representatives from other medical specialties
  - Nurse Midwife; Nurse Practitioner; Psychologist; Pediatrician; OB/GYN; Family Physician
- Five representatives from the health insurance industry
  - Including one from an insurer serving Medicaid recipients, and one representative from the Massachusetts Association of Health Plans
- One survivor of PPD

Legislative next steps

- Budget amendment for pilot program
- Medicaid coverage of screening
- Mapping project

Speakers

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