



Report to Congress and National Strategy to Improve Maternal Health Care

Task Force on Maternal Mental Health



Overview

The Task Force's National Strategy and Report to Congress are an important part of broader federal efforts to address women's overall health (including their mental health) and maternal health across the nation. The Task Force's documents are aligned with multiple ongoing initiatives, including but not limited to:

- **White House Initiative on Women's Health Research**
- **White House Blueprint for Addressing the Maternal Health Crisis**
- **HHS Secretary's Postpartum Maternal Health Collaborative**
- **Hear Her (CDC)**
- **Maternity Care Action Plan (CMS)**
- **Transforming Maternal Health Model (CMS)**
- **Talking Postpartum Depression Campaign (HHS Office on Women's Health)**
- **National Maternal Mental Health Hotline (HRSA)**
- **The Enhancing Maternal Health Initiative (HRSA)**
- **The State Technical Assistance Maternal Mental Health Learning Communities (SAMHSA)**

Report to Congress

- Presents the ACWS subcommittee's findings on maternal mental health conditions and SUDs in the United States, related federal programs, and best practices
- Describes current data on the prevalence of maternal mental health conditions and SUDs
 - Pregnancy-related deaths and disparities
- Highlights best practices that are evidence-based, evidence-informed, and promising

Report to Congress

Highlights:

- Federal programs including services and current coordination with a focus on gaps and opportunities for improved collaboration
- Overarching themes of the listening sessions and opportunities for state and local partnerships
- State of national policies and programs related to maternal mental health conditions and SUDs

OWH's *Talking Postpartum Depression* Campaign

The *Talking Postpartum Depression* campaign aims to empower women to seek help for PPD by destigmatizing PPD through increased

1. Awareness of PPD symptoms
2. Visibility of reliable resources
3. Understanding of ways to access care



Primary Target Population: U.S. Mothers ages 18-44

This campaign emphasizes reaching populations most at-risk for developing PPD and utilizes the lived experience of diverse women across the country.

Secondary audiences: family members, friends, supporters, health care professionals


Campaign Toolkit – www.womenshealth.gov/talkingPPD/toolkit

- Video and Written Testimonials
- Social Media Assets
- Downloadable and Printable Content

Call-to-Action:

- **National Maternal Mental Health Hotline**
 - ✓ Call or text 1-833-TLC-MAMA (1-833-852-6262)
 - ✓ Free, confidential, 24/7 mental health support for moms and their families before, during, and after pregnancy. English and Spanish-speaking counselors are available. Interpreter services supporting 60 other languages.

Postpartum Depression Resources



Everyone's journey to healing from postpartum depression (PPD) is unique. The first step is reaching out for support. Below are national resources and tips to find local support.

If you are in mental health distress or a suicidal crisis:
Call or text the Suicide and Crisis Lifeline at 988 for free access to a trained crisis counselor who can provide you support and connect you with needed help and resources. If you're deaf or hard of hearing, use your preferred relay service or dial 711 then 988.

If you are experiencing symptoms of postpartum depression and need support now:
Call or text the National Maternal Mental Health Hotline at 1-833-TLC-MAMA (1-833-852-6262) for 24/7 free access to professional counselors. If you're deaf or hard of hearing, use your preferred relay service or dial 711 then 1-833-852-6262.


The hotline provides:

- Real-time support and information
- Response within a few minutes, 24 hours a day, 7 days a week
- Resources
- Referrals to local and telehealth providers and support groups
- Culturally sensitive support
- Counselors who speak English and Spanish
- Interpreter services in 60 languages

If you're looking for resources in your area:

- Talk to someone you trust like family, friends, or other moms. They can listen and help you find local support options.
- Talk to your health care professional and let them know what you're experiencing. Ask for guidance and information about local resources. If you don't have a health care professional you can find one using the [Find a Health Center Tool](#).
- Reach out to local community organizations like social service agencies, family resource centers, libraries, community centers, or places of worship. They may be able to provide information about support groups or resources for women dealing with PPD.
- Look for support groups that give women with PPD an opportunity to meet up and talk. These groups can offer understanding, advice, and a chance to connect with others who can relate to what you're going through. Some examples are new moms' groups, breastfeeding support groups, and local chapters of PPD support groups.
- Search online for local support groups using websites or social media groups where women discuss PPD to see if they offer local meetups or gatherings that you can join.
- Call or text "Help" to the Postpartum Support International helpline at 1-800-944-4773 for PPD information, resources, and support groups for women, partners, and supporters.

To learn more, visit
www.womenshealth.gov/talkingPPD

 **OASH** | Office on Women's Health



OWH's Continued Maternal Mental Health Efforts

- ***Talking Postpartum Depression Campaign Wrap-Up***
 - Additional videos, fact sheets, and social media efforts through September 2024
- ***Talking Postpartum Depression Pilot Project***
 - 5 community-based pilot sites to assess behavior change among women with or at risk for PPD who use campaign materials
 - Cohort of health care providers to assess knowledge and referral behaviors for patients with or at risk for PPD
 - Creation of provider-focused training for maternal mental health conditions
 - Updates to campaign materials to include other maternal mental health conditions



The National Strategy to Improve Maternal Mental Health Care

TASK FORCE ON MATERNAL MENTAL HEALTH

Vision

The Task Force expects that its work—this National Strategy, the report to Congress, and subsequent reports and updates—will improve maternal mental health and well-being for all individuals and communities across the nation.

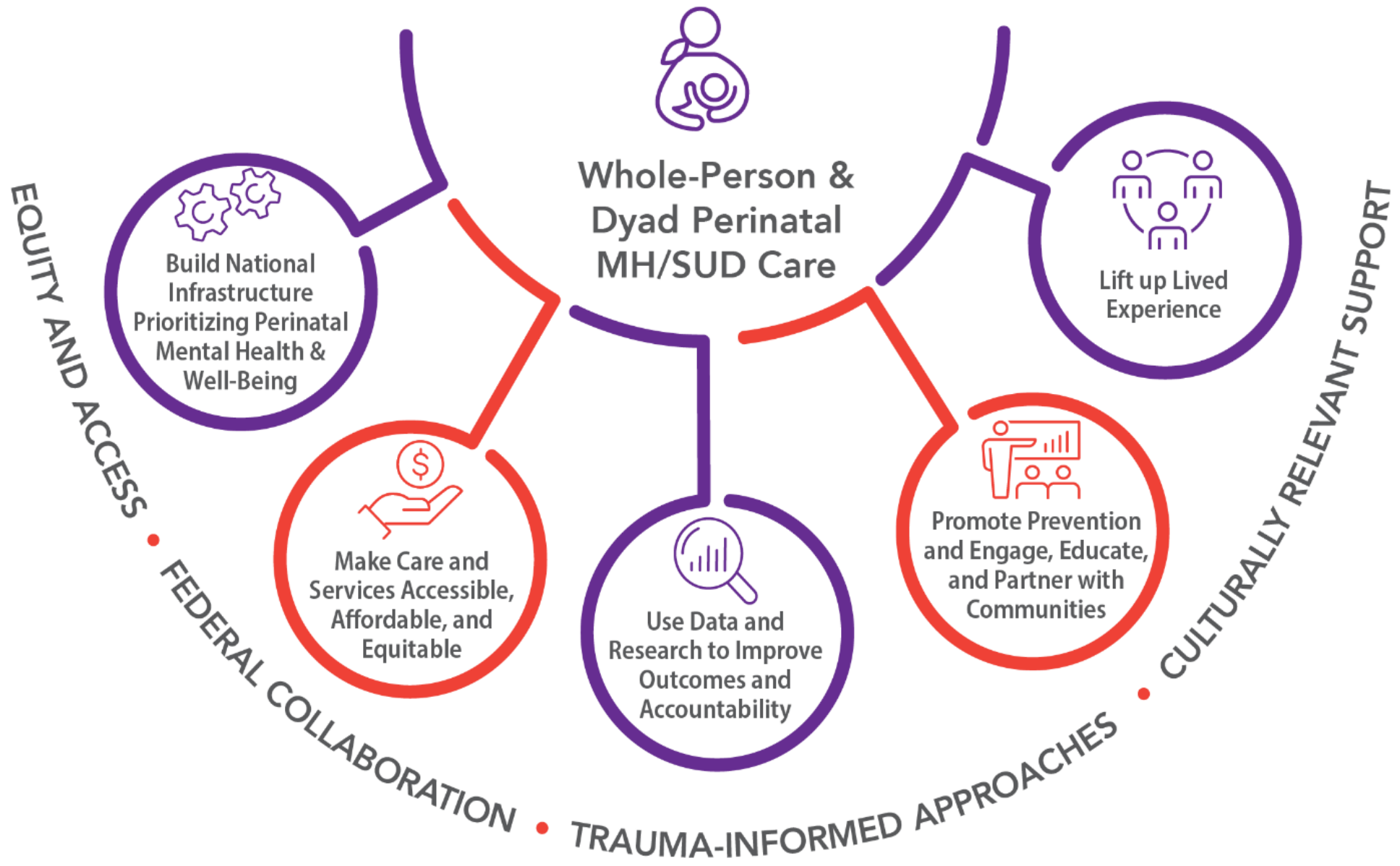
The Task Force envisions that perinatal mental health and substance use care in our nation will be seamless and integrated across medical, community, and social systems, such that there will no longer be a distinction between physical and mental health care and that models of care and support will be innovative and sensitive to the individual's experiences, culture and community.

Audience

The primary target audience for this national strategy is the federal government - Congress, the Executive Branch, and the many federal departments and agencies that spearhead the provision of health care and services in communities.

The federal government's work cannot be carried out without collaborations and partnerships with states, public-private entities, industry, advocates, medical and professional societies, communities, and individuals with lived experience and their families.

Note that at times the recommendations specify a particular entity within federal government when relevant and in other cases, no particular agency or entity is specified because it is implied that *a whole-of-government approach is needed*.



Pillar 1:

Build a National Infrastructure that Prioritizes Perinatal Mental Health and Well-Being

- Priority 1.1:
Establish and Enhance Federal Policies That Promote Integrated Perinatal and Mental Health/SUD Care Models with Holistic Support for Mother-Infant Dyads and Families from Multidisciplinary and Interdisciplinary Teams
- Priority 1.2:
Establish and Enhance Federal Policies That Promote Perinatal Mental Health and Well-Being with a Focus on Reducing Disparities

Pillar 2:

Make Care and Services Accessible, Affordable, and Equitable

- Priority 2.1:
Implement culturally relevant and trauma-informed clinical screening and diagnosis and improve linkages to accessible timely intervention and treatment.
- Priority 2.2:
Create Accessible and Integrated Evidence-Based Services That Are Affordable and Reimbursable
- Priority 2.3:
Build Capacity by Training, Expanding, and Diversifying the Perinatal Mental Health Workforce

Pillar 3:

Use Data and Research to Improve Outcomes and Accountability

- Priority 3.1:
Use Data and Research to Support Strategies and Innovations That Improve Outcomes
- Priority 3.2:
Build a Foundation for Accountability in Prevention, Screening, Intervention, and Treatment



Pillar 4:

Promote Prevention and Engage, Educate, and Partner with Communities

- Priority 4.1:
Promote and Fund Primary Prevention Strategies at the Community Level
- Priority 4.2:
Elevate Education of the Public About Perinatal Mental Health and Substance Use and Engage Communities with Outreach and Communications



Pillar 5:

Lift Up Lived Experience

- Priority 5.1:
Listen to the Perspectives and Voices of
People with Lived Experience*
- Priority 5.2:
Prioritize the Recommendations from People
with Lived Experience*

**from the USDS Lived Experience Report*





Next Steps - National Strategy

- **Implementation Planning**
- **Report to Governors**
- **Annual Updates**



Thank You!

Contact Information

- [Task Force on Maternal Mental Health | SAMHSA](#)

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