

NH AIM/ERASE Monthly Webinar September 14, 2023

WELCOME!

- We will begin shortly
- Reminder, we will be recording this session
- Please mute your line upon entering and chat in your comments or questions
- Daisy Goodman & Karen Lee will monitor the chat box and call on you to unmute yourself
- If you have trouble connecting, please email
Karen.G.Lee@Hitchcock.org



To Receive CME/CNE Credit for Today's Session

Text: 833-884-3375 – NEW PHONE #

Enter Activity Code: 134399

Need help? clpd.support@hitchcock.org



Today's Agenda

- Perinatal Mental Health: NH implications
- Results of a PCORI funded Community Engagement project and invitation to engage in continuing conversation
- Upcoming



A quality improvement initiative to support best practices that make birth safer, improve maternal health outcomes and save lives.



CDC works with MMRCs to improve review processes that inform recommendations for preventing future deaths.



<https://saferbirth.org/>

<https://www.cdc.gov/reproductivehealth/maternal-mortality/erase-mm/index.html>

Critical Collaborations: NNEPQIN, ERASE and AIM



Created from a Centers for Disease Control, Division of Reproductive Health source



NH Birthing People Speak Out About Perinatal Care: Results of 7 Emotional Journey Mapping Sessions

NH AIM/ERASE Monthly Webinar
September 14, 2023



Disclosures

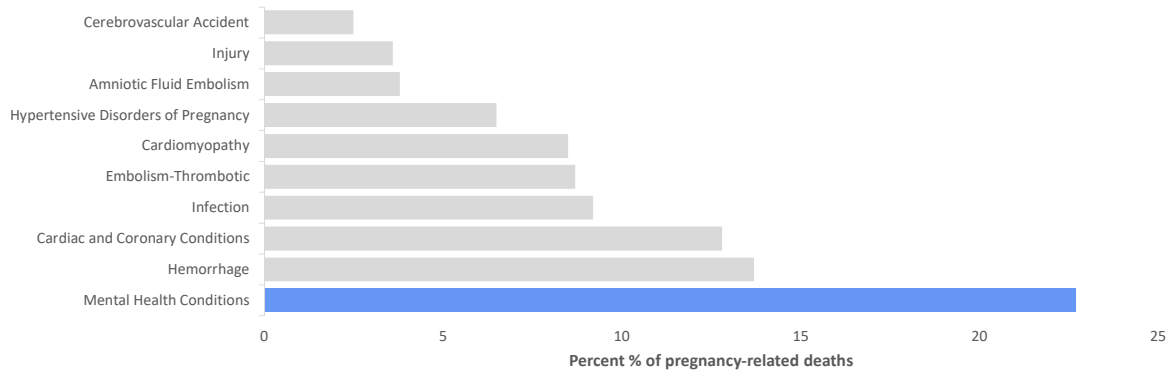
Research reported in this presentation was partially funded through a Patient-Centered Outcomes Research Institute (PCORI) Award (Contract ID: EADI-26752).

The views, statements and opinions in this presentation are solely the responsibility of the authors and do not necessarily represent the views of the Patient-Centered Outcomes Research Institute (PCORI), its Board of Governors or Methodology Committee.



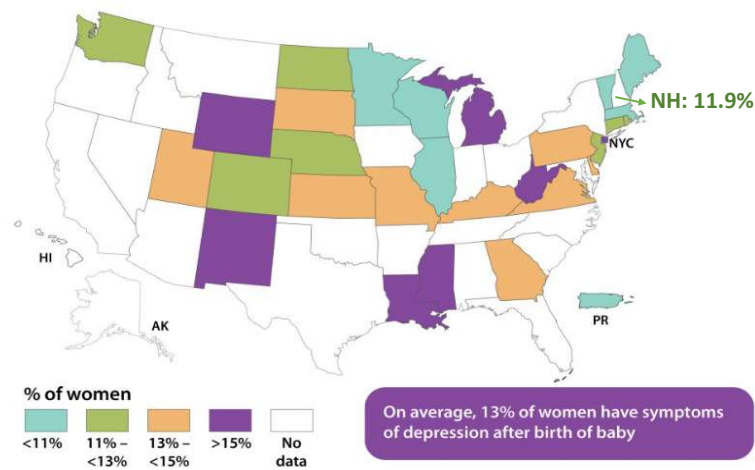
Perinatal Mental Health

During 2017-2019, mental health conditions were the leading cause of pregnancy-related deaths in the U.S.



Data from Maternal Mortality Review Committees in 36 US States, 2017–2019 | CDC

Percentage of Women With Symptoms of Depression After Birth: 2018 PRAMS Data From 31 States



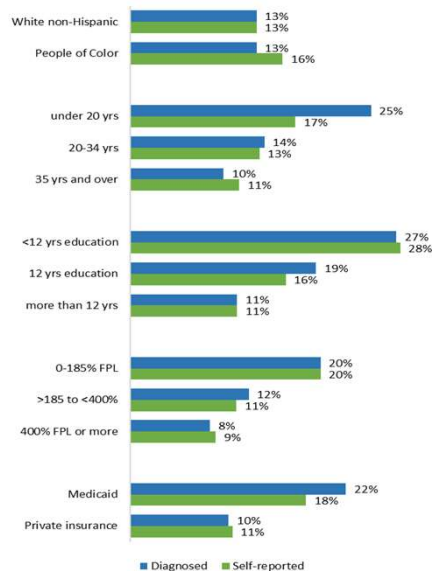
Stressors Associated with Pregnancy Related Deaths in NH

Social or emotional stressor	Number of deaths
Child Protective Services involvement	6
History of childhood trauma	4
History of domestic violence	4
History of psychiatric hospitalizations or treatment	7
History of substance use	16
History of substance use treatment	12
Pregnancy unwanted	1
Prior suicide attempts	6
Recent trauma	1
Unemployment	7
Other	3
Unknown	2
None	3

Data Source: MMRIA ¹¹

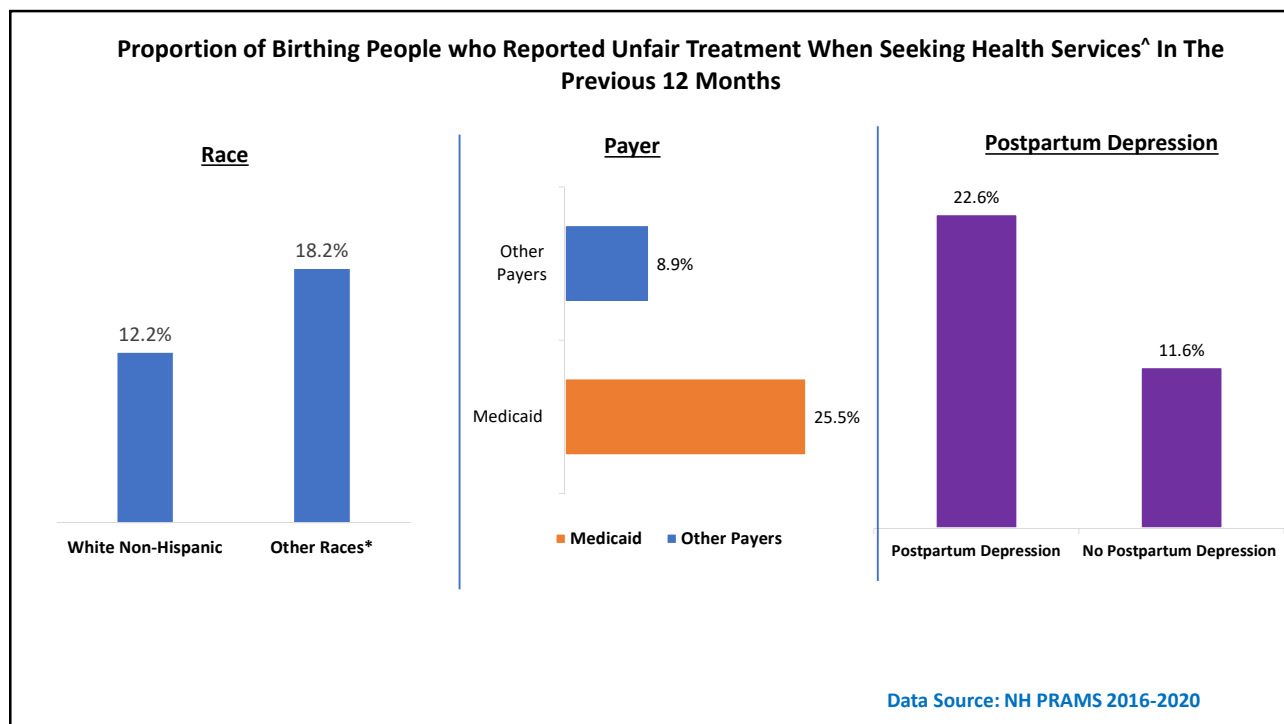
Postpartum depression, among sub-groups 2016-2020

*



*People of Color- All races except Non-Hispanic white

[prams-maternal-depression.pdf\(nh.gov\)](https://prams-maternal-depression.pdf(nh.gov))



Building Community - Perinatal Quality Collaborative Partnerships To Share knowledge and Reduce Disparities in Mental Health

This project brings together an existing loose network of stakeholders—patients, community health workers, nurses, midwives, physicians, mental health professionals, language interpreters—to develop a sustainable, community-focused infrastructure for disseminating research-based innovations across New Hampshire’s diverse birthing communities.

<https://www.pcori.org/research-results/2022/building-community-perinatal-quality-collaborative-partnerships-share-knowledge-reduce-disparities-mental-health>

Project Goal

To make high quality
mental health care
accessible to all NH
birthing people

What is the best way
to provide mental
health care across all
NH birthing
communities?

The Project Team

Community
Advisors

Partner
Organizations

Implementation
Team

Community
Consultants

Solomon Hallal,
Emmerence Doroka,
Wanda Castillo-Diaz,
Rute Ferreira

Melissa
Martinez-
Adorno,
David
Laflamme,
Julie Frew
Beatrice Ngugi

Postpartum
People

Bi-State
PCA,
NNEPQIN,
others TBD

Daisy Goodman,
Alka Dev,
Trinidad Tellez,
Lisa Lamadriz,
Sophia Perez

Milestones Timeline

Building Community-Perinatal Quality Collaborative partnerships to share knowledge and reduce disparities in mental health



017

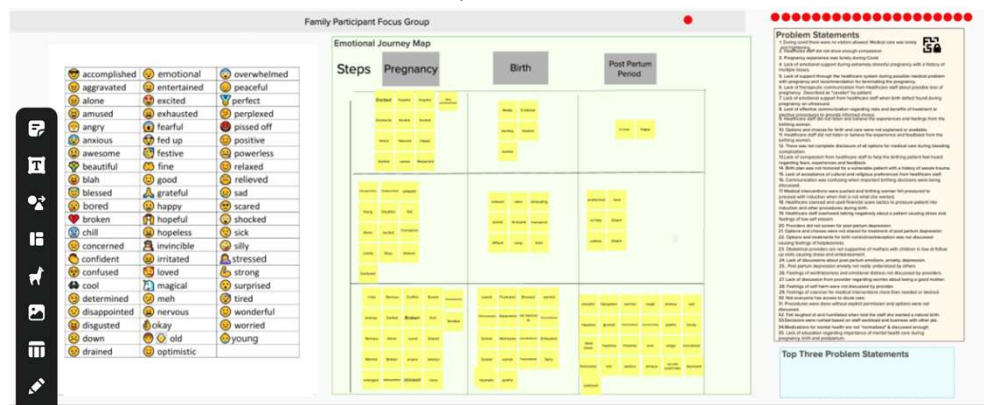
Emotional Journey Mapping Project



What is Emotional Journey Mapping?

Tanya Lord PhD

Post-partum



- 10

Emotional Journey Mapping Sessions

Sessions	Dates	Language and Community	Participants	New Hampshire Towns Represented		
1	March 24, 2023	English	11	*Concord *Littleton Laconia Belmont	Derry Pittsfield Hooksett	Meredith *Lebanon Hudson
2	April 6, 2023	English	11	Sanbornton Franklin Center Harbor *Canaan	*Lebanon Ashland *Concord Bridgewater	
3	April 19, 2023	English	7	Laconia *Concord Danbury	*Littleton *Canaan	
4	May 6, 2023	Kinyarwanda	8	Manchester		
5	May 9, 2023	English	6	Bethlehem Littleton Meredith	Berlin *Concord	
6	June 1, 2023	Spanish	5	Manchester		
7	August 15, 2023	LGBTQ+	1	Manchester		
Total			49			

EJM Sessions: Findings





- Eager to share their stories
- Expressed gratitude for the opportunity to share and listen
- Relayed importance of improving the birthing experience for others
- Mental health and postpartum depression were significant topics that consistently emerged without specific prompts.
- Shared stories of past birth traumas
- Discussed challenging interactions with healthcare staff.
- Relayed importance of having personal and cultural preferences respected during the birth process
- Expressed distress at feeling coerced away from birth plans
- Shared feelings of sadness and frustration over wishes being disregarded, leading to a sense of powerlessness during their birth experience.
- Shared that lack of communication and understanding from healthcare providers led to a breakdown in trust
- Wondered about the motives behind decisions made during their care.
- Shared feeling unable to communicate with providers regarding “unspoken feelings” of guilt, shame, disconnect with previous child or current infant.



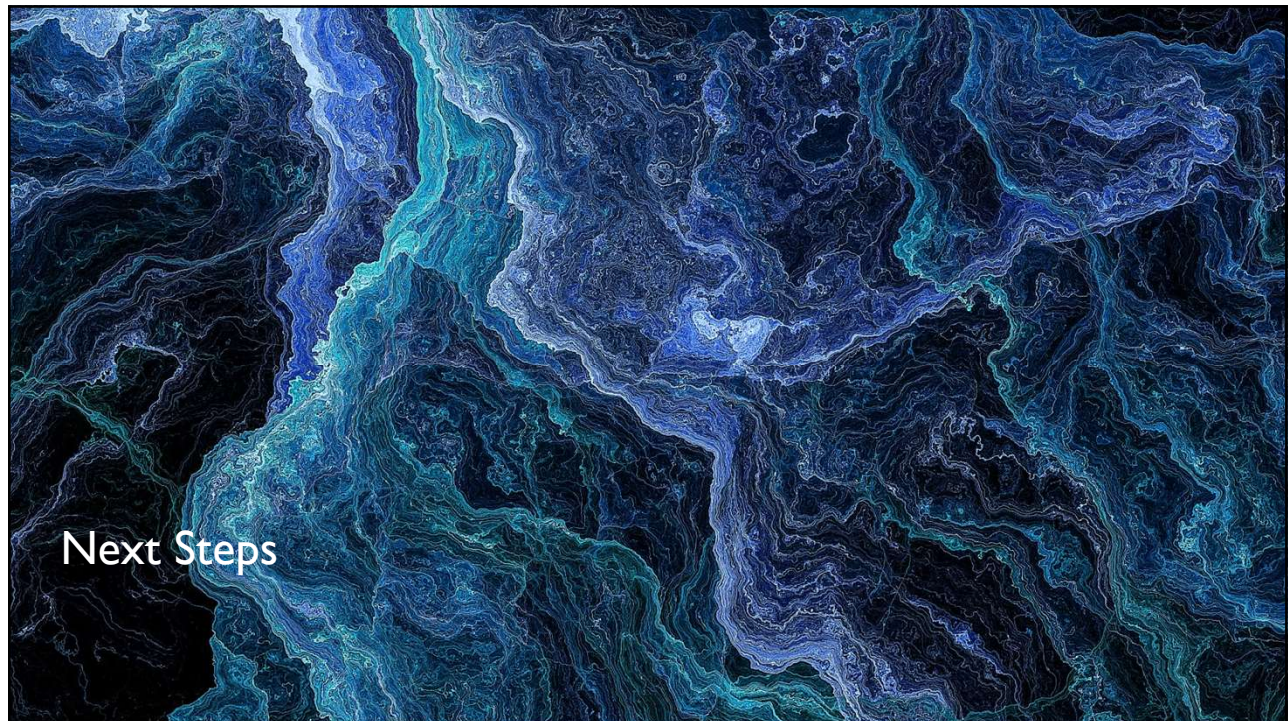
Emerging Themes

Lack of:

- Provider Compassion and Empathy
- Shared Decision Making
- Mental Health and Emotional Support
- Patient Autonomy
- Patient Empowerment
- Respect and Dignity
- Cultural Awareness and Respect
- Provider Continuity
- Patient Education and Understanding
- Clinical Care
- Postpartum Support
- Breastfeeding Support

The Patient Experience

- “I felt humiliated when the nurse laughed at me and said, ‘Good luck with that,’ when I told her I wanted a natural birth.”
- “I was not allowed to urinate before beginning to push and that was so stressful.”
- “I was pushed to do an induction by being told that more time in the hospital would cost more money.”
- “When the doctor talked to me about ‘postpartum’ (depression) it was like they were just checking off a box, I really did not understand that this could happen to me.”
- “Being new to the United States, I did not understand the language and I was very frightened when my blood was drawn for tests. They took so much blood, I was so afraid I was going to die”
- “I delivered during Covid, which was lonely and frightening.”



Next Steps



CES

- Community Engagement Studios (CES)
- a framework to help a group think together about solving a specific problem

What are Community Engagement Studios?

Collaborative sessions to discuss ideas and solutions to shared problems that impact healthcare in New Hampshire communities

- Brainstorm ideas to address perinatal mental health challenges in New Hampshire
- Brainstorm ideas to disseminate solutions for perinatal mental health needs in New Hampshire

We want to hear from you!

- Community Experts
- Doulas
- Nurses
- Physicians
- Community Health Workers
- Social Workers
- Midwives
- Lactation Consultants



Community Engagement Studios

2-hour Virtual Sessions

Dates

Community Experts and EJM Participants

- September 19, 2023 10 am – 12 pm
- September 21, 2023 2 pm – 4 pm

Providers

- October 10, 2023 10 am – 12 pm
- October 19, 2023 2 pm – 4 pm



Please participate!!!

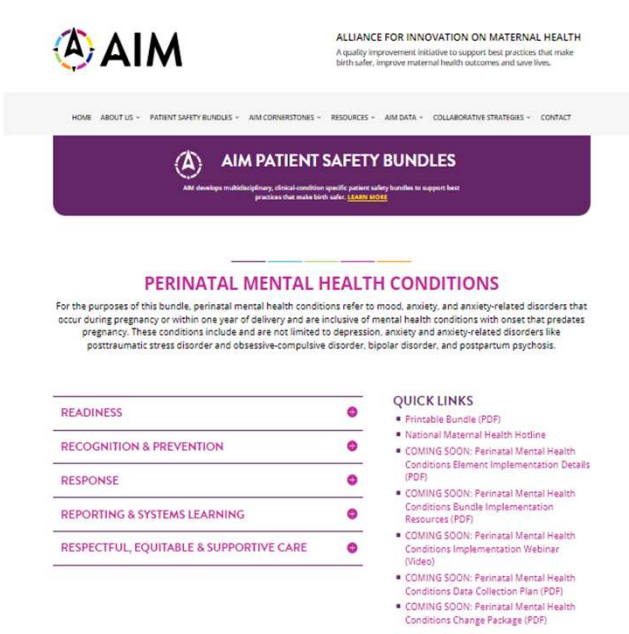
- Email Lisa @ postpartumhealth@hitchcock.org

Questions & Comments?



Ask Daisy what to do with this and next slide?

PMHC Safety Bundle



The screenshot shows the AIM Patient Safety Bundles website. At the top is the AIM logo and the text "ALLIANCE FOR INNOVATION ON MATERNAL HEALTH". Below this is a navigation bar with links: HOME, ABOUT US, PATIENT SAFETY BUNDLES, AIM CORNERSTONES, RESOURCES, AIM DATA, COLLABORATIVE STRATEGIES, and CONTACT. The main header is "AIM PATIENT SAFETY BUNDLES" with a sub-header "AIM develops multidisciplinary, clinical condition specific patient safety bundles to support best practices that make birth safer. [LEARN MORE](#)". The section is titled "PERINATAL MENTAL HEALTH CONDITIONS". Below this is a paragraph explaining the bundle's purpose. To the left is a table of contents with links to Readiness, Recognition & Prevention, Response, Reporting & Systems Learning, and Respectful, Equitable & Supportive Care. To the right is a "QUICK LINKS" section with links to a Printable Bundle (PDF), National Maternal Health Hotline, COMING SOON: Perinatal Mental Health Conditions Element Implementation Details (PDF), COMING SOON: Perinatal Mental Health Conditions Bundle Implementation Resources (PDF), COMING SOON: Perinatal Mental Health Conditions Implementation Webinar (Video), COMING SOON: Perinatal Mental Health Conditions Data Collection Plan (PDF), and COMING SOON: Perinatal Mental Health Conditions Change Package (PDF).

<https://saferbirth.org/psbs/perinatal-mental-health-conditions/>

To Receive CME/CNE Credit for Today's Session

Text: 833-884-3375 – NEW PHONE #

Enter Activity Code: 134399

Need help? clpd.support@hitchcock.org

NEXT MONTH

Perinatal Mental Health Bundle Rollout

NH AIM/ERASE Monthly Webinar
October 12, 2023

