



# Perinatal Mental Health Learning Community

Webinar October 21, 2021 12 – 1 p.m.

## Breastfeeding and Perinatal Mental Health

*Faculty: Nakeisha Robinson, MA, LMFT, perinatal health and mental health advocate and consultant*



# Housekeeping

- Everyone is automatically muted upon entry.
- Raise your hand if you'd like to be unmuted.
- Use “Chat” to interact with everyone (“all panelists and attendees.”)
- Use “Q&A” to ask questions of panelists and organizers.
- Download slides from Chat.

# Our Team



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# Program Website

<https://www.hqinstitute.org/post/perinatal-mental-health-learning-community>



Hospital Quality Institute

About HQI Programs The Quality Quarterly Education

## Perinatal Mental Health Learning Community

Feb. 2020 – Dec. 2021



The Perinatal Mental Health (PMH) Learning Community provides California hospitals with education, technical assistance, and peer support to strengthen perinatal mental health. The program assists hospitals to comply with Assembly Bill 3032, the Maternal Mental Health Conditions law. The program is administered by HQI, funded by California HealthCare Foundation and delivered in collaboration with Maternal Mental Health NOW and CommonSpirit Health.

Program at a Glance

Webinars

Group Office Hours

Online Resources for Hospitals

Peer Sharing

1:1 Coaching

Participating Hospitals

Enroll

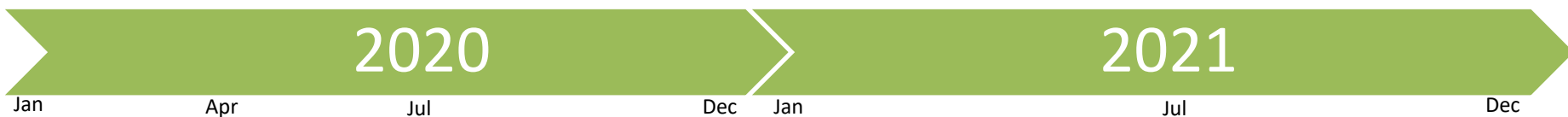
Contact

FAQs



Hospital Quality Institute

# Timeline – Perinatal Mental Health Learning Community



## Education and Technical Assistance (Feb '20 - Dec '21)

- Webinars (2020: Feb, Apr, Jun, Aug, Oct, Dec; 2021: Feb, Apr, Jun, Aug, **Oct**, Dec)
- Group Office Hours (2020: Mar, May, Jul, Sept, Nov; 2021: Jan, Mar, May, Jul, Sept, Nov)
  - 1:1 Technical Assistance (on demand)
  - In-Person Regional Events (Nov '20)

**TODAY**

## Training Tools and Resources (Apr '20 – Dec '21)

- E-learning module and quick reference guide for staff
  - E-learning module for patients
  - Brochure template

Case Studies Developed

Case Studies Available

# AB-3032: Hospitals Maternal Mental Health Act

- It requires all birthing hospitals in California to provide education and information to postpartum people and their families about maternal mental health conditions, post-hospital treatment options, and community resources.
- All regular staff in labor and delivery departments (e.g. registered nurses and social workers) must receive education and information about maternal mental health disorders.
- Hospitals can offer additional services to ensure optimal care.

Law became effective on January 1, 2020.

# Past Topic Recordings Available

- Staff Education on Perinatal Mental Health
- Patient and Family Information & Education
- Resource and Referral Development
- The Impact of Covid 19 on Hospitals and Birthing Families
- Disparities in Perinatal Mental Health Care
- Supporting Patients around Perinatal Loss
- Supporting NICU Families
- Birth Trauma and Perinatal Mental Health
- Substance Use Disorders and Perinatal Mental Health
- Child Abuse Reporting and Perinatal Mental Health

**Recordings and slides available on program website:**

<https://www.hqinstitute.org/pmh-learning-community>

# Register for the Capstone Event!



PMH Learning Community

## Capstone Event

December 8, 2021  
10 AM – 2:30 PM



Register on the program website:

<https://www.hqinstitute.org/pmh-learning-community>

## Fathers & Partners and Perinatal Mental Health

Register on the program website:

<https://www.hqinstitute.org/pmh-learning-community>

# Today's Focus: Breastfeeding and Perinatal Mental Health

## Learning Objectives:

- Learn about the role breast/chestfeeding plays in perinatal mental health.
- Identify two ways to support breast/chestfeeding with individuals struggling with mental health disorders.

# Featured Speaker: Nakeisha Robinson, MA, LMFT



*Nakeisha Robinson, MA, LMFT,  
perinatal health and mental  
health advocate and consultant*



# Perinatal Mental Health and Breastfeeding

Hospital Quality Institute (HQI) Learning Community

NAKEISHA N. ROBINSON, MA, LMFT

October 21, 2021

## Disclosures

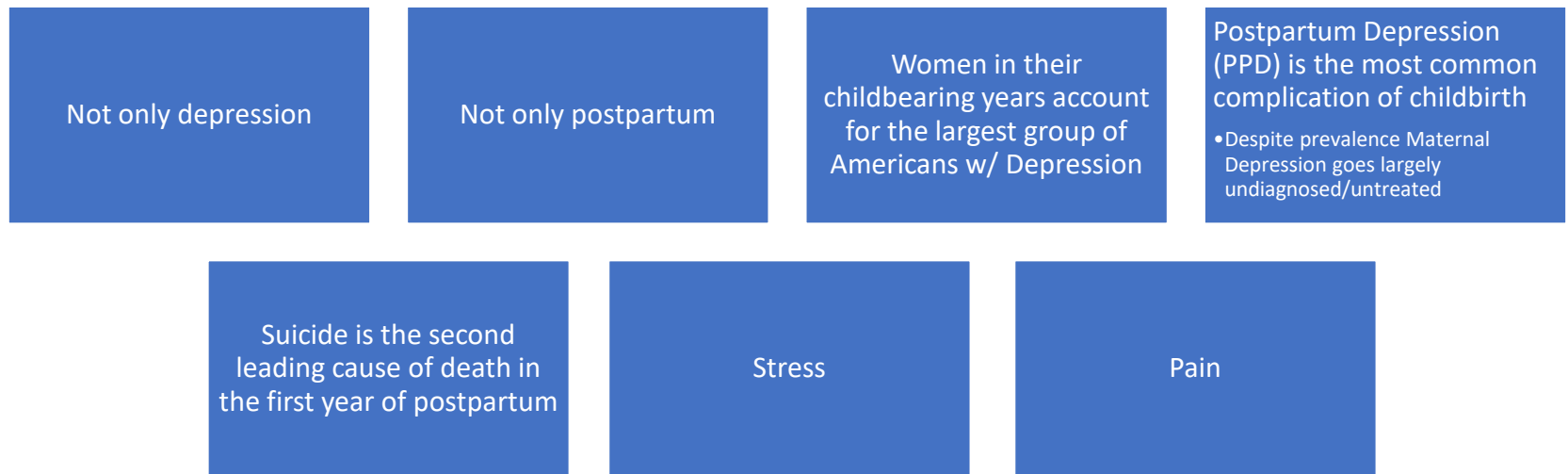
Nakeisha N. Robinson, MA, LMFT has no relevant financial relationship to disclose.



# Objectives

1. Increase knowledge around common Perinatal Mental Health challenges experienced by those who breast/chestfeed and how to support them.
2. Recognize and describe how and why perinatal mental health impacts breast/chestfeeding for birthing people and their families.
3. Learn ways to promote parenting protective capacity.

# Perinatal Mental Health

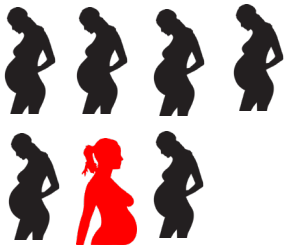


**Source:** National Perinatal Association – Position Statement 2018, Perinatal Mood and Anxiety Disorders

# Inclusive language

- The terms "breastfeeding" and "chestfeeding" are used interchangeably and together to describe the action of feeding an infant human-milk.
- The term "chestfeeding" is offered as an alternate term for lactating persons that prefer not to use the term "breast" when referring to their own bodies.
- Commitment to caring authentically about the wellbeing of all individuals and to inclusivity (adapted from BreastfeedLA).

# Prevalence & Points of Consideration



Depression during and after pregnancy is common and treatable. Recent CDC research shows that ~ **1 in 7 moms and 1 in 10 dads** experience symptoms of postpartum depression. (Postpartum Support International)

- 15-20 % of women experience significant symptoms of depression and anxiety during pregnancy or within a year of giving birth
- Mental health history
- Experiences during pregnancy
- Type of birth
- Subsequent breast/chestfeeding experience

# Does breast/chestfeeding affect perinatal mental health?

- Bidirectional relationship
  - Prenatal depression | anxiety
  - Poor feeding experience
- BF has protective factors for maternal mental health
  - Good vs Bad
  - EBF
  - Sleep

**Source:** (Fallon et al (2016) Postpartum Anxiety and Infant-Feeding Outcomes: A Systematic Review; Brown, Rance and Bennett (2016) Understanding the relationship between breastfeeding and postnatal depression: the role of pain and physical difficulties)

# When feeding the baby isn't a good experience



- Pain, physical difficulties, latch problems
- Goals & expectations
- Emotions

# What does it look like?


- Tired
- Unhappy
- Worried
- Irritable
- Emotional
- Intrusive thoughts

- ❖ Breastfeeding dyad:
  - ✓ Impacts interaction w/ infant
    - ✓ Hunger cues
    - ✓ Responsiveness
    - ✓ Latch
  - ✓ Feeding outcomes

Source:

A large orange shape on the left side of the slide, consisting of a rectangle with a quarter-circle cutout on its right side.

What is the  
connection?

- ❖ Prevalence
  - ❖ Risk for PMH
  - ❖ Medications and breast/chestfeeding
  - ❖ Breast/chestfeeding atonement
  - ❖ Non-binary
  - ❖ Fathers
- 
- Three short, curved yellow lines in the bottom right corner of the slide.

Other  
considerations....

- ✓ Antidepressants in pregnancy
- ✓ Considerations when interacting w/ patients



# Why does this matter?

- Breast/chestfeeding is time-sensitive activity
- Hospital policy
  - Impacts breast/chestfeeding rates & experiences
- Knowledge and skills related to breast/chestfeeding and lactation management

A yellow brushstroke graphic consisting of several curved lines, located on the left side of the slide.

## Source:

Moore ER, Anderson GC, Bergman N. Early skin-to-skin contact for mothers and their healthy newborn infants. Cochrane Database Syst Rev. 2007(3):CD003519.  
Anderson GC, Moore E, Hepworth J, Bergman N. Early skin-to-skin contact for mothers and their healthy newborn infants. Birth. 2003;30(3):206-207.



D-MER  
Dysphoric Milk  
Ejection Reflex



Physiological  
anomaly



Treatment



# Breast/Chestfeeding

## Racial Disparities

State Average – 70%

- White 81%
- American Indian 70.6%
- Asian Pacific Islander 66.9%
- Hispanic 66.3%
- Asian 65.8%
- Black/African American 61.5%

### Contributing factors

- Culturally and linguistically appropriate care
  - Access to lactation professionals of color
    - Cultural congruence
- Engagement
  - Inclusive language
  - Availability of staff (i.e. rural vs. coastal | day laborer, etc.)
  - Community trust
  - Knowledge around culturally relevant resources

Source: <https://www.breastfeedla.org/covid-19-and-breastfeeding-for-health-professionals/>

# Lets connect the dots

Medical complications in mother baby	Social isolation	Poor/inadequate social support
Preterm infants	Non-private health insurance (e.g. Medicaid)	Traumatic labor/delivery
Infant feeding	BIPOC birthing people	Non binary parents

- Intersecting factors for increased risk in perinatal mood & anxiety disorders
- Depression is a real risk to breast/chestfeeding
- Paid Family Leave (PFL)
- Breast/chestfeeding duration

# Opportunities to Promote Parenting Protective Capacity

- Early interventions
- Preconception | Interconception
- Mindfulness-based treatments – promote adaptive coping with negative life events
- Building toolkit of resources

The Edinburgh Postnatal Depression Scale (EPDS) form, a 10-item questionnaire used to screen for postnatal depression. It includes a title, a name field, a date of birth field, and a list of 10 items to be rated on a scale from 0 to 3. The form also includes a section for a clinician's name and a date.The PAID LEAVE SCREENING QUESTIONS form, a checklist used to determine if an employee is eligible for paid leave. It includes sections for Bonding Leave, Caregiving Leave, and Sick and Safe Days, each with a list of questions to be answered. The form also includes a section for a clinician's name and a date.

## Continued Learning

- Paid Family Leave Education: <https://www.workfamilyca.org/education>
- Perinatal Mental Health –
  - Find Local Postpartum Support International (PSI) Coordinators <https://www.postpartum.net/get-help/locations/>
  - <https://www.cabwhp.org/>
  - Mental health screening: <https://screening.mhanational.org/%20screening-tools/>
- [www.BreastfeedingMadeSimple.com](http://www.BreastfeedingMadeSimple.com)
- [www.KathleenKendall-Tackett.com](http://www.KathleenKendall-Tackett.com)
- Webinar on D-MER: <https://www.breastfeedla.org/webinar-recordings#acc-11>
- Breastfeeding and Medications
  - [www.halesmeds.com/](http://www.halesmeds.com/)
- Perinatal Health Equity: <https://www.cdph.ca.gov/Programs/CFH/DMCAH/PEI/Pages/default.aspx>
  - Los Angeles: <https://www.blackinfantsandfamilies.org/>

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Questions



# Opportunity for 2022

- Focus on breastfeeding support
- HQI to establish a learning community for hospitals with the CA Breastfeeding Coalition
- Helping hospitals comply with SB 402 and CA Health and Safety Code 123367
- Stay tuned for more information!

# Follow-up Survey

- Sent to one individual at each hospital on October 19
- Great opportunity to learn how we have met your needs
- Please complete by November 15

# Coming Up

**November 18:** Webinar (Noon – 1 pm)

- Fathers & Partners and Perinatal Mental Health

**December 8:** Capstone Event (10 am – 2:30 pm)

Register for both on HQI website: <https://www.hqinstitute.org/pmh-learning-community>

# Webinar Evaluation

## Polling questions:

- 1) Today's webinar was a good use of my time  
(agree-disagree-unsure)
- 2) Today's webinar increased my understanding of the  
interplay between breast/chestfeeding and maternal  
mental health  
(agree-disagree-unsure)

## Open Text feedback – type into “Chat”:

What could have been done better or differently?