



Moms Mental Health Initiative

Experienced community advocates representing
moms in perinatal mental health spaces

Who We Are

Our Mission

Moms Mental Health Initiative is a nonprofit organization dedicated to helping moms navigate perinatal mental health disorders by sharing information, connecting them to resources and providing peer-driven support.

Our Vision

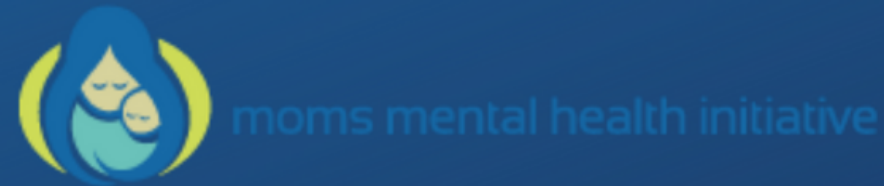
All moms in southeastern Wisconsin who are suffering from perinatal mental health disorders have access to evidence based treatment and peer support.



Our Promise to Moms: With the right help, you will feel better.

A Note on the Name:

When Moms Mental Health Initiative first came to be, it was led by two moms eager to help other moms. As the years have gone on and our community has grown, we recognize that our work with birthing people goes beyond those who may identify as moms. So while we are Moms Mental Health Initiative, we remain an organization for all. All gender identities and sexualities of birthing and parenting people are welcome here. With the right help, you will feel better.



MOOD & ANXIETY DISORDERS WILL IMPACT
1 IN 5 MOMS
DURING PREGNANCY OR POSTPARTUM



Important Definitions

Perinatal Mental Health Disorders (PMHDs)

AKA:

Perinatal mood and anxiety disorders (PMADs)- less inclusive as substance use disorder is highly prevalent

Postpartum depression -too broad a term for the range of conditions

Baby Blues - PMHDs ARE NOT Baby Blues

New Mom Worries- NOT the same as postpartum anxiety/OCD

Frequency & Function

A new parent may cry, have intrusive/scary thoughts they don't intend to act on, feel concerned about their baby, experience physical symptoms of stress due to lack of sleep and life changes.

HOWEVER,

When these symptoms are happening frequently- crying all day without reason or intrusive thoughts any time they complete a necessary task like a diaper change, for example- or interfering with the person's ability to function as expected, that is when intervention may be needed.

Karin's Story

"By the time I realized I was in full-blown PPA, I was struggling and couldn't wait. I wasn't sleeping and was crying throughout the day while trying to maintain my career, and I was suffering from panic attacks."



"I couldn't get through to my primary doctor and her nurse told me on the phone I couldn't take any medications because I was breastfeeding. I tried my OB. They told me to get counseling and to see my general MD. I tried my MD again and she was on vacation for a week. I was suffering. My work was failing. Things started falling apart at home. I tried finding a psychiatrist and none of them were accepting new patients for 6 months..."

In Wisconsin PRAMS, 2019

- 16% of mothers experience depression in the 3 months before pregnancy
- 14% during pregnancy
- 12% in the postpartum period



75% of mamas diagnosed with a PMAD remain untreated



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27%
of pregnant
& postpartum
women in
Wisconsin
are battling
an anxiety
disorder

Groups with Higher PMAD Rates

- Insured by Medicaid at delivery
- Smoked in the last 3 months of pregnancy
- Use WIC perinatally (pregnant and postpartum)
- Identify as a women of color



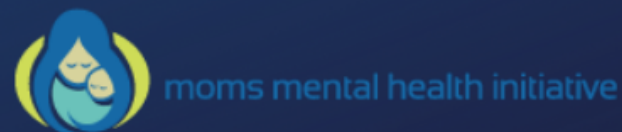
Compared to white women, Black women are **twice as likely to experience** perinatal mental health conditions but **half as likely to receive treatment.**

The Cost of Untreated PMHDs

The latest WI Maternal Mortality Report found

**Mental health conditions caused
52% of pregnancy-related deaths.**

These were preventable deaths



\$307,200,000



The cost of untreated perinatal mental
health conditions in Wisconsin





Touchpoints

“All healthcare practitioners who are dedicated to providing care for women during the first postpartum year should feel compelled to make sure each new mother is receiving optimal care and excellent clinical support and guidance.”

-Karen Kleinman

“We need education for all professionals who touch a pregnant woman’s life.”

- MMHI Participant

PMADs: More than just Postpartum Depression

- Pregnancy and Postpartum Depression
- Pregnancy and Postpartum Anxiety
- OCD, PTSD, Panic Disorder
- Pregnancy and Postpartum Bipolar Disorders
- Pregnancy and Postpartum Substance Use Disorders
- Postpartum Psychosis



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Postpartum mental health disorders are the #1 complication of childbirth.

If you're feeling...

- Unsure you can be a mom, overwhelmed
- Regretful of becoming a mom
- Angry or enraged
- Unlike yourself
- Unsure you like your baby how you're "supposed" to (numb or disconnected)
- Sad or guilty or ashamed
- Extremely sad- crying non-stop with or without reason
- Unable to eat or unusually hungry
- Restless at night or unable to sleep when baby sleeps
- Forgetful, foggy-brained, distracted
- Constantly worried something bad could happen to you or your baby
- Physical distress like headaches, stomach aches, dizziness or chest tightness
- Disturbed by dark, unwanted, intrusive thoughts (harm coming to your baby or other "scary" things)
- Afraid to be alone with your baby
- Like you want it to end (thoughts of hurting yourself or your baby)
- Afraid to share your thoughts or feelings with a loved one or member of your medical team.

You may be experiencing a perinatal mood & anxiety disorder. You are not alone.

Contact your doctor and/or connect with us at momsmentalhealthmke.org or by email at info@mmhimke.org

Hear her.





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Postpartum Depression

Might look like...

- Regret of becoming a mom in the first place
- Fear you made the **WRONG** decision to have a baby
- Anger or rage toward your baby or others
- Disconnected or numb to what's happening around you
- Sad and guilty you're missing out on your baby's first days/weeks/months
- Like a mess, crying nonstop even for no apparent reason
- Like you are a terrible mother unworthy of your child

"I was in such a bad place, I just didn't respond. I appreciated she was reaching out. When you're feeling all the things, it's overwhelming. Even though she genuinely cared, I felt so hopeless I couldn't even take that in."

- MMHI Participant





“I was in the examination room with my OB, sobbing, telling him how much physical pain I was in, about the severe panic attacks, the dark thoughts, the inability to stop crying, etc. All he said was that he didn't think it was postpartum depression, but to let him know if it got worse.”

- Megan



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Postpartum Anxiety

Might look like:

- Constant worry
- Feeling as though something bad is going to happen
- Racing thoughts that are difficult to slow down
- Feeling like your to-do list is never done or that your work is never good enough
- Sleep and/or appetite disturbances
- Feeling as though you can't sit still, restlessness
- Physical symptoms such as dizziness, nausea or diarrhea
- A mom may also suffer from postpartum panic disorder with which she will likely experience extreme nervousness and recurring panic attacks.



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Postpartum OCD

Might look like:

- Worried constantly no matter what others might say to reassure you
- Disturbed by dark, unwanted thoughts – possibly about harm coming to your baby
- Afraid to be alone with your baby
- Spending hours Googling or researching in an attempt to decrease your anxiety
- Avoiding potentially harmful things such as the stove, stairs, knives or bathtub
- Obsessed with checking things such as locked doors or your baby's breathing
- Sleep and/or appetite disturbances
- Afraid that if you share what you're experiencing with loved ones or a doctor, that your baby will be taken from you

*** Scary thoughts with Postpartum OCD are egodystonic-meaning a mama is scared or horrified by these thoughts and would not act on them.



"If I make this appointment and share the thoughts, they're not going to call CPS, right?"

-Emma



"The vast majority of people I know did not go through it as deep as I am and the few who did, did not talk about it."

-Luna



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Postpartum PTSD

Might look like:

- Flashbacks
- Nightmares
- Avoidance of stimuli associated with the perceived traumatic event
- Difficulty sleeping
- Anxiety and/or panic attacks



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Perinatal Substance Abuse

- Nearly 15 percent of women who are less than a year from the birth of their child and had postpartum depression engaged in binge drinking.
- Nearly 9 percent of this group reporting abusing other drugs.
- These prevalence rates are higher than women who did not give birth or who did give birth but did not have postpartum depression.

via The Substance Abuse and Mental Health Services Administration (SAMHSA)




“I am this hollowed out person.”

- *MMHI Participant*

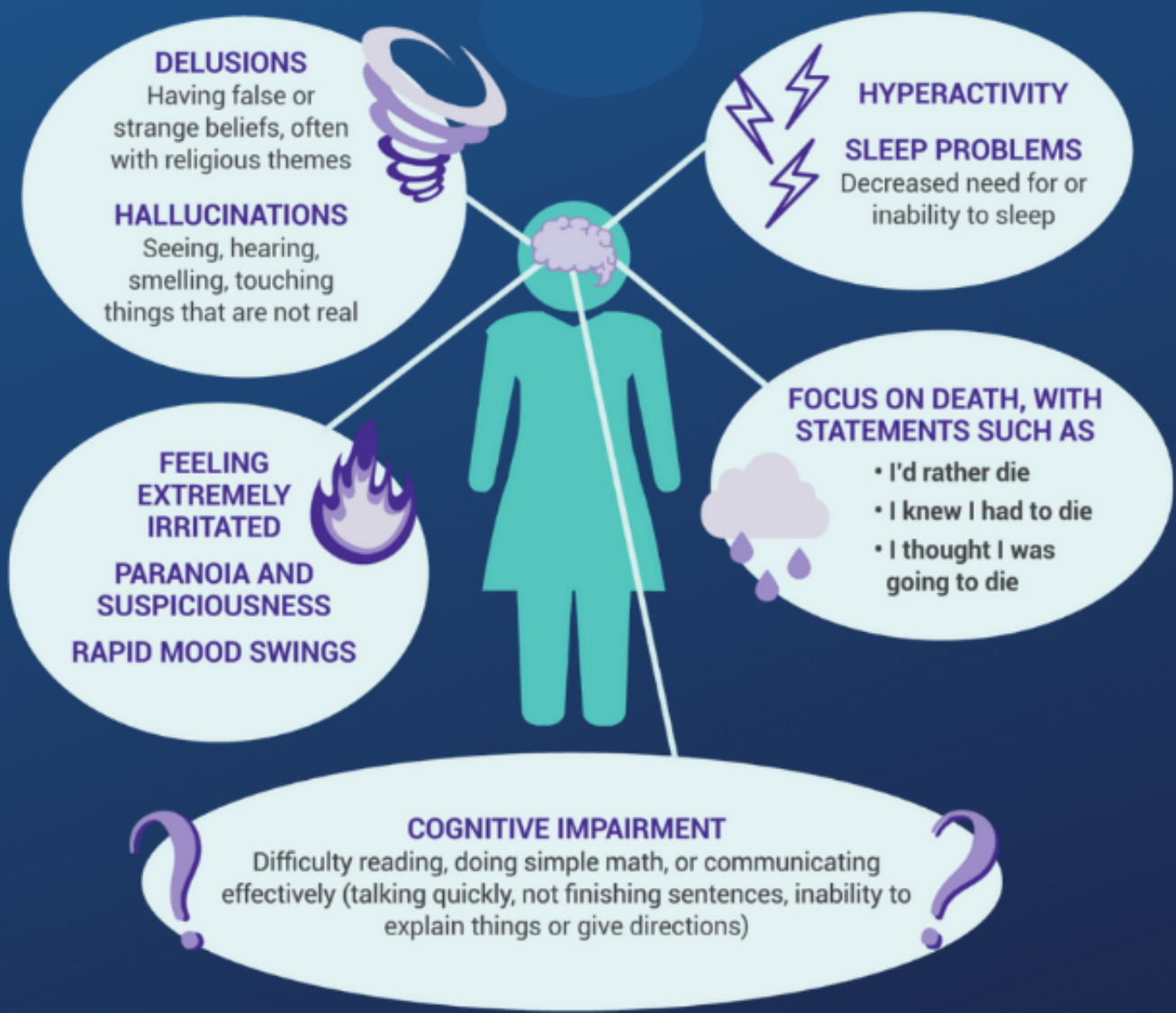


“My mind betrayed me.” - Gina

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Signs & Symptoms of Postpartum Psychosis

VIA @MMHLA



- DELUSIONS**
Having false or strange beliefs, often with religious themes
- HALLUCINATIONS**
Seeing, hearing, smelling, touching things that are not real
- FEELING EXTREMELY IRRITATED**
- PARANOIA AND SUSPICIOUSNESS**
- RAPID MOOD SWINGS**
- HYPERACTIVITY**
- SLEEP PROBLEMS**
Decreased need for or inability to sleep
- FOCUS ON DEATH, WITH STATEMENTS SUCH AS**
 - I'd rather die
 - I knew I had to die
 - I thought I was going to die
- COGNITIVE IMPAIRMENT**
Difficulty reading, doing simple math, or communicating effectively (talking quickly, not finishing sentences, inability to explain things or give directions)

PPP IS TEMPORARY AND TREATABLE, BUT REQUIRES IMMEDIATE ATTENTION.



"When the ladies [from MMHI] told me I'm going to have to fight this battle for my life, I didn't realize how literal that was."

Lena, Circle of Hope Mama



WHAT DOES MMHI DO?

INFORMATION SHARING

Connecting, educating and empowering the community at large about perinatal mental health disorders.



Perinatal and Post-Natal Mental Health

Virtually | February 9 (10:00am - 2:30pm, including a 30-minute lunch break)



Sarah Bloomquist, CFLE
Moms Mental Health Initiative



Dr. Christina Wichman
The Periscope Project



Emily Aleksy, LCSW, PMH-C
PSI- Wisconsin

*Up to 4 CE credits will be issued to those attending



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14K followers • 260 following

RESOURCE BROKERING

Connecting moms with perinatal mental health disorders to evidence-based treatment.



What it means to be a Preferred Provider

"All healthcare practitioners who are dedicated to providing care for women during the first postpartum year should feel compelled to make sure each new mother is receiving optimal care and excellent clinical support and guidance."

-Karen Kleinman

I am...

- Knowledgeable about or trained in perinatal mental health
- Experienced treating mothers experiencing perinatal mental health disorders
- Understanding that mothers experiencing PMADs cannot wait to talk with someone
- Open to new client referrals from Moms Mental Health Initiative
- Flexible to meet the needs of perinatal mothers
- Connected with other perinatal mental health providers and can make qualified referrals in the event I'm unavailable.

We need your help.

If this sounds like you, please reach out at momsmentalhealthmke.org or by email at info@mmhimke.org.



@MOMSMENTALHEALTHMKE

FACEBOOK.COM/MOMSMENTALHEALTHMKE

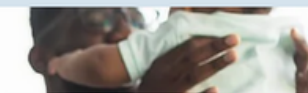
@MMHIMKE

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[About Us](#) [About PMH](#) [Stories of Hope](#) [Get Help](#) [Providers](#) [Get Involved](#)



Let Us Help You Find Help

Our providers are uniquely selected to help you get the best support you can during this prenatal stage of life. If you need extra help in finding a provider to meet your needs, please reach out and one of our specialists can help you find someone.

[Message Us Directly For Help](#)

Feeling Overwhelmed? Message Our Resource Brokering Team for Personalized Help

PEER SUPPORT

Connecting moms with perinatal mental health disorders to one another

Circle of Hope

Finding another person who's been in my shoes, who's seen this darkness and risen up-she's what I need to keep going. She is **HOPE.**

[Send a Message To Join](#)

Pregnant & Postpartum Moms OCD/Anxiety Virtual Group

Starts April 4, 2023
Tuesdays 12 - 1:30 pm, 8 weeks.
\$50/week.
Children are welcome.

A group for pregnant & postpartum moms to build community, learn more about OCD/anxiety, utilize Exposure and Response Prevention therapy techniques, and more!
Group facilitators are Carrie Torres, MS, LPC-IT and Colleen Christiansen, MS, LPC, SAC, mental health therapists with extensive OCD/anxiety experience.



Carrie Torres,
MS, LPC-IT



Colleen Christiansen,
MS, LPC, SAC

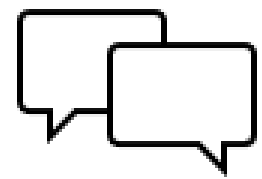
To register or ask any questions, please email:
carrietorresann@gmail.com

iocounseling.com

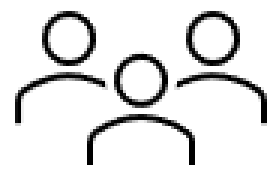




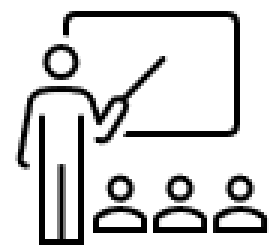
Perinatal psychiatric access program available to providers and professionals caring for pregnant & postpartum women struggling with behavioral health disorders offered at no cost.



Real time consultation between eligible provider and perinatal psychiatrist



Community resource information



Educational materials (live didactic, web-based presentations, toolkit)

Periscope does not interact with patients directly.

Encourage health care providers to contact Periscope for support in their patient behavioral health care.



Moms Navigating PMADs Need:



To know how common it is

To know they are not alone

To know they can choose what is best for them

To know this is a treatable disease

For their providers to be compassionate and well-versed on PMADs and the latest research

Others to be committed to their mental health

HOPE

Remember Karin?



“...Desperate, I reached out in my local breastfeeding group. One girl referred me to MMHI. I was referred to a doctor and was seen the next day and was able to start on medication right away. Within a week I felt better. Within two weeks I felt great. I could not afford to wait for anyone once the PPA hit and no one else should have to.”

Karin

How We Can Help



*CONTINUING
EDUCATION*



*REFERRALS FOR
PATIENTS*



CIRCLE OF HOPE
PEER SUPPORT



'MOM CARDS' FOR
OFFICES/VISITS



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Stay in Touch!

*Questions or referrals
email info@mmhimke.org*

www.momsmentalhealthmke.org

