Goals for this presentation

Understand barriers to equity in maternal mental health and strategies to overcome them based on successes around the country.
Outline

• Introduction to CLASP and our Maternal Depression work
• Definitions of Key Terms, Overview of Inequities in Maternal Mental Health Care
• Common Barriers to Advancing Equity
• Strategies to Overcome these Barriers & Examples of Success
• Additional Resources
The Center for Law and Social Policy

Policy solutions that work for low-income people
CLASP’s Mental Health Work

CLASP’s mental health work is focused on maternal depression (and other perinatal mood and anxiety disorders) as well as young adult mental health for people with low incomes aged 16-25.
The Moving on Maternal Depression (MOMD) Project

- CLASP began the MOMD project to increase access to screening, prevention, and treatment services for maternal depression while advocating for services that are racially equitable and culturally relevant.
- We have been working closely with NJ, NY and PA as well as 7 other states through a learning community.
What is maternal depression?
Maternal depression is a range of depressive symptoms, experienced by a pregnant woman or a mother with a young child.\(^1\)

MOMD’s goals
The Center for Law and Social Policy (CLASP) aims to increase access to maternal depression prevention, screening, and treatment while advocating for services that are racially equitable and culturally relevant.

MOMD helps states advance racial equity, systems, and policy by...
- Improving statewide education of current and upcoming policy changes and opportunities.
- Improving, creating, and reforming policies.
- Collecting and disseminating lessons learned, successes, and challenges.
- Increasing the quality and availability of services related to maternal depression provided by states.

Factors impacting policy change \(^2\)
- Cross-sector partnerships
- Social determinants of health
- Cultural relevance/racial impact
- Research/data
- Mothers’ voices/experiences
- Voices/experiences of communities of color

MOMD technical assistance (TA) states
- New Jersey
- New York
- Pennsylvania

States proposed a range of goals they will work to achieve during the project period, including developing data systems to improve access, screening, and treatment as well as integrating standardized screening and referral processes in existing programs statewide. In addition to these three TA states, CLASP convenes a learning community with 7 additional states (D.C., LA, MA, MI, OR, RI, and VA).
CLASP’s Definition of Racial Equity

• Our definition of racial equity is the condition that would be achieved if your racial identity no longer predicted your life’s outcomes.
Social Determinants of Health

A PUBLIC HEALTH FRAMEWORK FOR REDUCING HEALTH INEQUITIES
BAY AREA REGIONAL HEALTH INEQUITIES INITIATIVE

SOCIAL INEQUITIES
- Class
- Race/Ethnicity
- Immigration Status
- Gender
- Sexual Orientation

INSTITUTIONAL INEQUITIES
- Corporations & Businesses
- Government Agencies
- Schools
- Laws & Regulations
- Not-for-Profit Organizations

LIVING CONDITIONS
- Physical Environment
  - Land Use
  - Transportation
  - Housing
  - Residential Segregation
  - Exposure to Toxins
- Economic & Work Environment
  - Employment
  - Income
  - Retail Businesses
  - Occupational Hazards
- Social Environment
  - Experience of Class, Racism, Gender
  - Immigration
  - Culture - Ads - Media Violence

RISK BEHAVIORS
- Smoking
- Poor Nutrition
- Low Physical Activity
- Violence
- Alcohol & Other Drugs
- Sexual Behavior

DISEASE & INJURY
- Communicable Disease
- Chronic Disease
- Injury (Intentional & Unintentional)

MORTALITY
- Infant Mortality
- Life Expectancy

UPSTREAM

INSTITUTIONAL INEQUITIES

LIVING CONDITIONS

RISK BEHAVIORS

DISEASE & INJURY

MORTALITY

Community Capacity Building
  - Community Organizing
  - Civic Engagement

Strategic Partnerships Advocacy

Current Public Health Practice

Emerging Public Health Practice

POLICY

Case Management

Health Care

Individual Health Education
Why We Need to Fight Inequity in Maternal Health

Simply – the status quo isn’t equitable.

• Nearly 40 percent of mothers of color experience depression after giving birth, twice the overall rate.

• Black women experience the highest rate of pre-term birth nationwide.

• Native American mothers are twice as likely to die during or after childbirth than white mothers, Black mothers are 3 times as likely.
Common Barriers

- The high cost of care
- A lack of service providers
- Cultural beliefs about mental health treatment including a lack of trust in the health care system
- Lack cultural competency in the mental health system
- Stigma about mental health both among and about communities of color
- Language barriers
- Racism, bias, and discrimination in treatment settings
- Lack of transportation, child care, paid leave, or time off from work
Strategies to Overcome these Barriers

• Disaggregating data
• Using upstream approaches
• Building long term, respectful relationships with the people you serve
• Hiring and retaining staff that reflect the diversity of their communities
• Regularly assess how policies impact different communities
Disaggregating Data

Allegheny County, PA created an integrated, cross-agency data inventory to examine racial inequities.
The Resilient Boston Project used the city’s history of racial division and social determinants of health to understand to guide its approach to reducing trauma and inequity in the city today.
Building Trusting Relationships

Minnesota’s Department of Health has partnered with the Somali American Parent Association to improve their mental health services for that community.
Building a Diverse & Culturally Competent Workforce

The New York City Department of Health and Mental Hygiene conducted department-wide racial equity trainings and assessments.
Conducting Regular Equity Assessments

San Mateo County, California conducted a 10 year review of a variety of health equity initiatives.
The Impact of Centering Equity

• Throughout the MOMD projects we have made racial equity a key focus of our work.
• As a result, Pennsylvania reevaluated its goals to focus more intentionally on closing disparities, fighting racism and implicit bias.
• In New York, our focus on equity has brought in groups of mothers with lived experience to the policymaking table.
Additional Resources

• The report contains many more resources for more information.
• Many organizations like the Center for Social Inclusion and RaceForward offer racial equity related trainings that may be useful
Specific recommendations for advocates

• Many of these strategies can be adapted for internal as well as external work. Start with internal reform!

• Hold yourselves and your partners accountable for centering equity throughout your work.
Coronavirus, Maternal Mental Health & Equity

• Many of us know that the coronavirus has had a greater impact on many communities of color than it has had on the rest of the country. Black, Latinx, and Native communities have been hit especially hard.

• The COVID-19 pandemic and the economic and mental health crises that it has caused make equity more important than ever.
Questions?

You can contact me at ssethi@clasp.org
Shiva Sethi

Moderated by: Joy Burkhard

Kay Matthews