

**BUILDING THE TREATMENT
CAPACITY FOR PERINATAL
WELLNESS IN FLORIDA**

REVIEW OF SURVEY RESULTS

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The Center for Health Equity

May 25, 2023

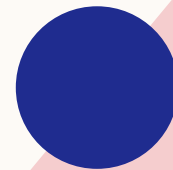
OBJECTIVES

Acknowledgements

About the Survey

Results and Findings

Recommendations



ACKNOWLEDGEMENTS

We want to thank the clinical workgroup and the Florida Maternal Mental Health Collaborative (FMMHC), as well as the members who took time to provide feedback, distribute, and complete a survey.

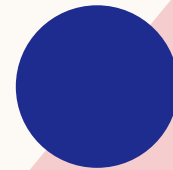
The full report was prepared by Hollie W. Hadley and Carol Gagliano from the Center for Health Equity, Inc. (CHE) in conjunction with Dr. Kirsten Ellingsen, PhD (Clinical Psychologist) and Sharon Ross-Donaldson (CEO/President of Center for Health Equity, Inc.)

ABOUT THE SURVEY



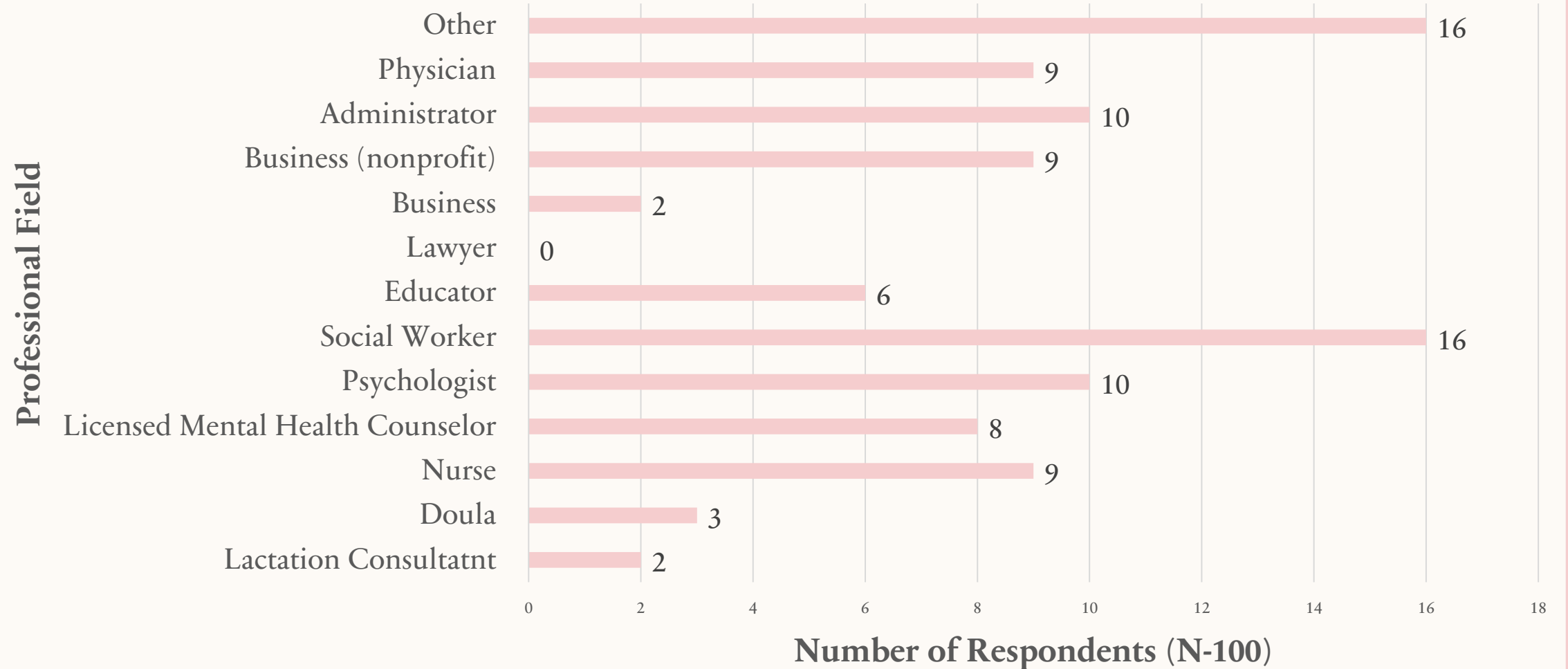
- This first survey is intended to identify clinical training needs, priorities, and resources related to clinical practice supporting perinatal wellness and maternal mental health
 - Design and collection of survey was led by Dr. Kirsten Ellingsen
 - Survey comprised of six-questions and made available online
 - Launched in September 2022 and re-distributed in December 2022
 - Total number of respondents is 100

RESULTS AND FINDINGS



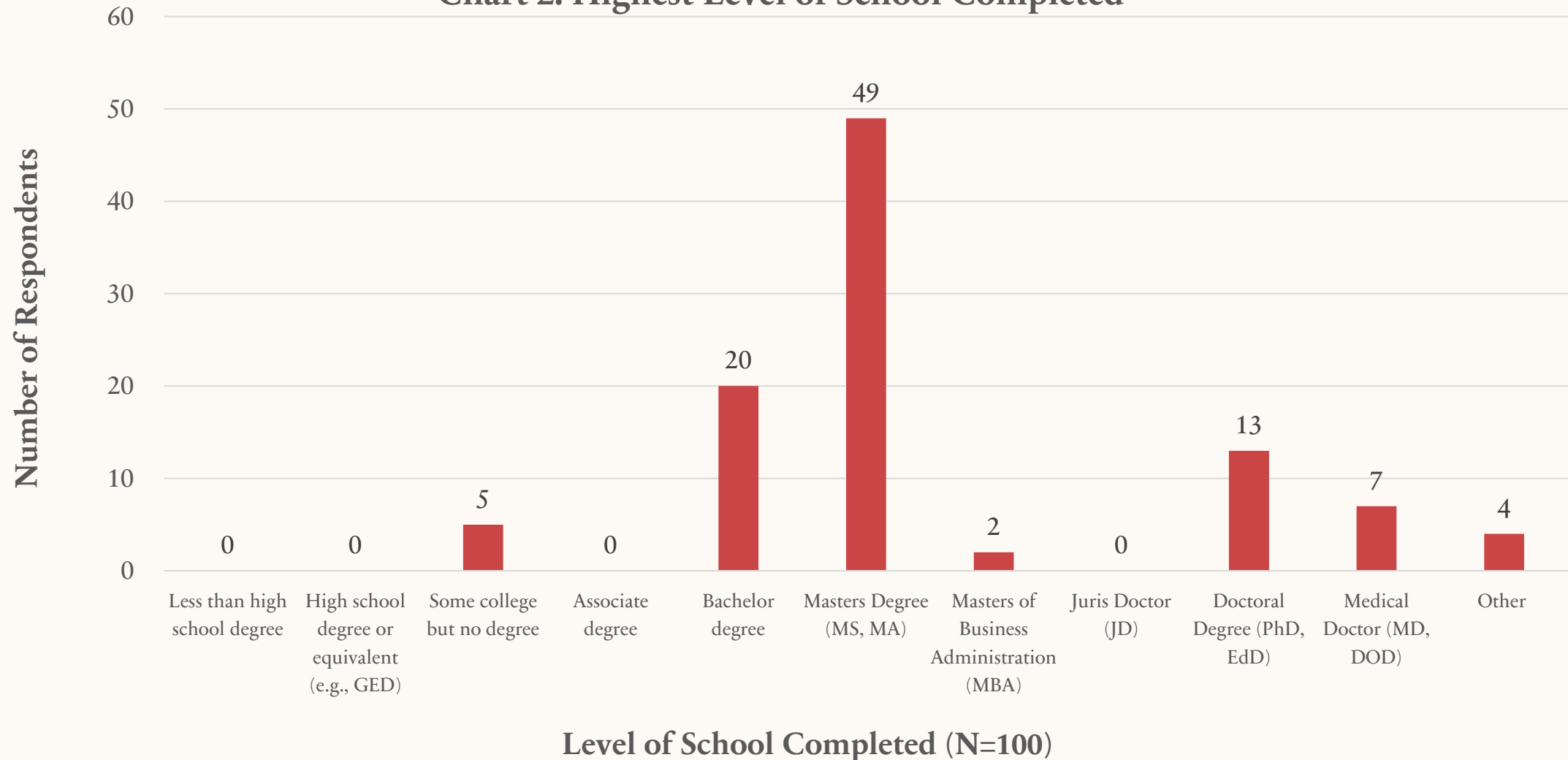
CHARACTERISTICS OF RESPONDENTS

Chart 1: Professional Field



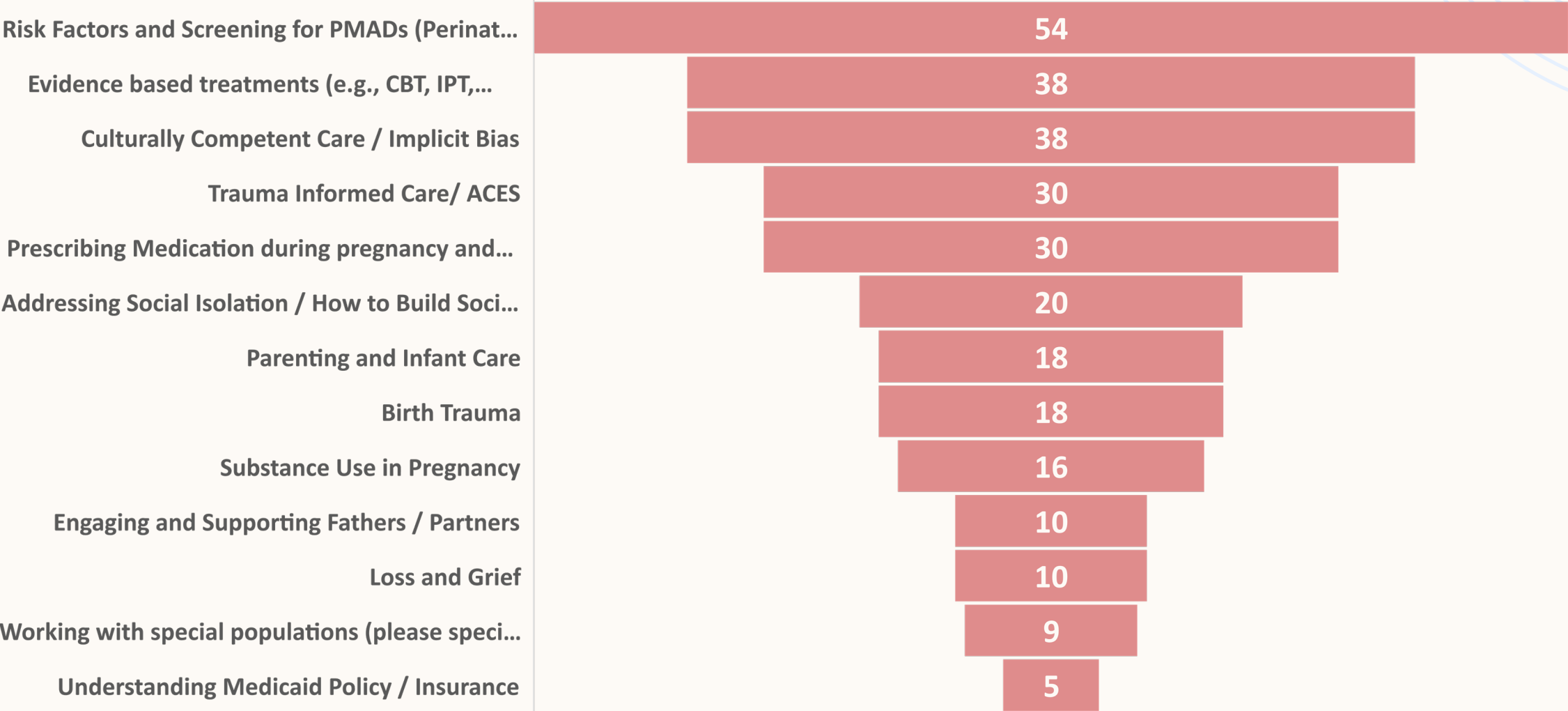
CHARACTERISTICS OF RESPONDENTS

Chart 2: Highest Level of School Completed



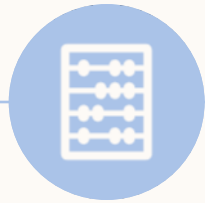
TRAINING AND RESOURCES

Chart 3: Training Topics Ranked



TRAINING AND RESOURCES

- To get a better understanding of which professional fields ranked the top three topics the highest, a crosstabulation was completed.
- The top three topics are (1) Risk Factors and Screening for PMADs (Perinatal Mood and Anxiety Disorders); (2) Evidence based treatments (e.g., CBT, IPT, EMDR); and (3) Culturally Competent Care / Implicit Bias



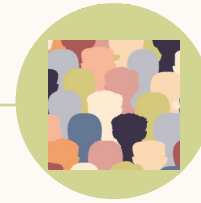
TREATMENT

Evidenced based Treatments ranked higher by mental health professions (MPH) than non-mental health professions.



SCREENING

Risk factors and Screenings for PMADs, mental health professionals and non-mental health professionals ranked this equally high.



CULTURAL CONSIDERATION

Culturally Competent Care/Implicit Bias ranked higher by non-mental health professions than mental health professions.

TRAINING AND RESOURCES

Categories for Other Topics/Areas of Training Needed
(Based on respondents write-in answers)

| Category of Training Area | Number of Times a Topic Relevant to Category Suggested |
|--|--|
| Women's Health (Mental) | 8 |
| Resources (e.g., programs, finding access) | 7 |
| Parenting Supports (i.e., training, relationship building) | 5 |
| Race Based Topics (i.e., implicit bias/systematic) | 4 |
| Screenings (PMADs) | 4 |
| Use of Evidence-based Tools | 4 |
| Women's Health (Physical) | 3 |
| Impact of Policy/political systems | 3 |
| Substance Abuse/Misuse | 2 |

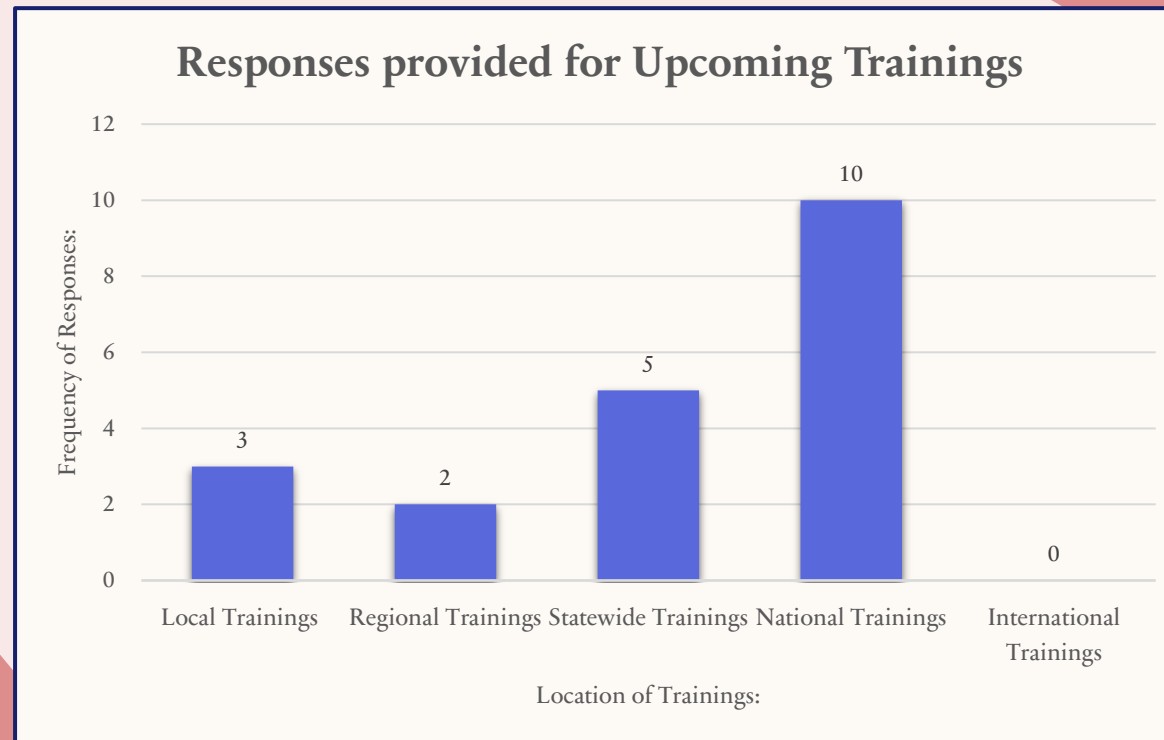
TRAINING AND RESOURCES

Categories for Specific Training Found Most Helpful
(Based on respondents write-in answers)

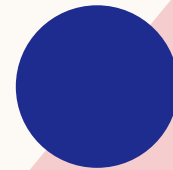
| Category of Training Area | Number of Times a Topic Relevant to Category Suggested |
|--|--|
| Post-partum support/ PSI / PMADs | 17 |
| Mental Health Training (Maternal & non-maternal) | 5 |
| Infant & Child Mental/Physical Health [e.g., Circle of security; CPP] | 4 |
| Perinatal Loss/Grief & Loss | 3 |
| Trauma Informed Care | 3 |
| Parental Support (e.g., Healthy Start, GPS, groups) | 3 |
| Motivational Interviewing | 2 |
| Breastfeeding Support | 2 |
| Fatherhood Involvement | 2 |
| IPT | 2 |
| Cultural Competency/Race-based | 2 |
| Education re Children (e.g., child development, child birth education) | 2 |

TRAINING AND RESOURCES

- 15 Respondents identified a local, regional, statewide, and/or national upcoming training.
- Trainings at the national level were more frequently identified than at other levels.



RECOMMENDATIONS



THINGS TO CONSIDER FOR FUTURE SURVEY DEVELOPMENT

ASK WHO IS MISSING

Consider including law enforcement, midwives, government, para-professionals/community health workers, lawyers and judges.

ENHANCE OUTREACH TO RESPONDENTS

Enhance outreach methods to obtain response from missing professions, professions that had low survey representation and those who do not have a BA or higher.. Consider adding Pediatrician to this outreach.

SEPARATE OUT MENTAL HEALTH PROFESSIONS

Consider having psychiatrist as a stand-alone profession and not rolled into the physician category.

ADD TECHNICALLY REQUIRED RESPONSE

For professions that are “catch-all” like educator, physician, etc., consider requiring a write-in response for respondent to provide more specificity.

SUPPORT PERINATAL WELLNESS USING A WIDER LENS

Add a question 3b like, “What topics or areas of training are needed for professions/providers working in the field of perinatal wellness?”

SUPPORT PERINATAL WELLNESS USING A WIDER LENS

Add a question 4b like, “What other topics or areas of training are needed for professions/providers working in the field of perinatal wellness?”



THINGS TO CONSIDER FOR FMMHC STRATEGIC WORK

ALIGN TRAINING

Align offerings of training to audience/professions targeted.

Review full list of suggested training topics available in final report.

**INCREASE
CAPACITY WE MUST**

FOR MHP INCREASE CAPACITY IN FOUR TRAINING AREAS

- ◆ Access post-partum support.
- ◆ Evidence based treatment models.
- ◆ Maternal health (esp. mental health).
- ◆ Risk factors and screening for PMADs.

ADD TRAINING TOPIC RELATED TO RISKS FACTORS

Consider adding a topic like understanding risks, identifying risks, and referring for services if risk suspected, for non-mental health professionals.

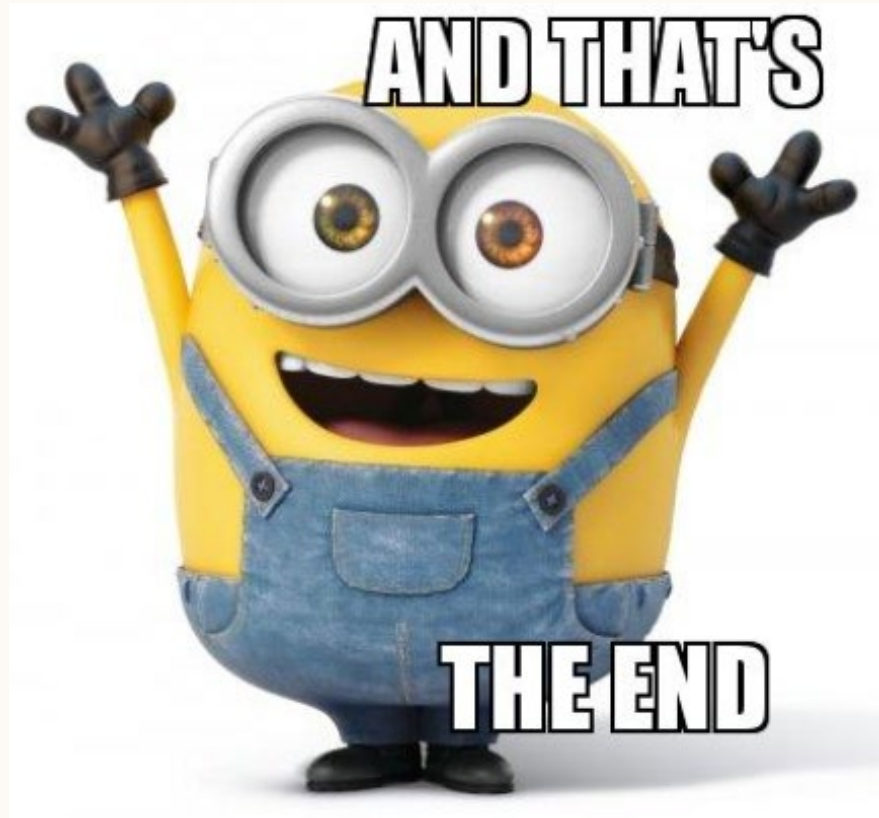
PROVIDE TRAINING ON CULTURAL COMPETENCE / IMPLICIT BIAS

For all professions, particularly non-MHP, focus on providing training on cultural competence / implicit bias

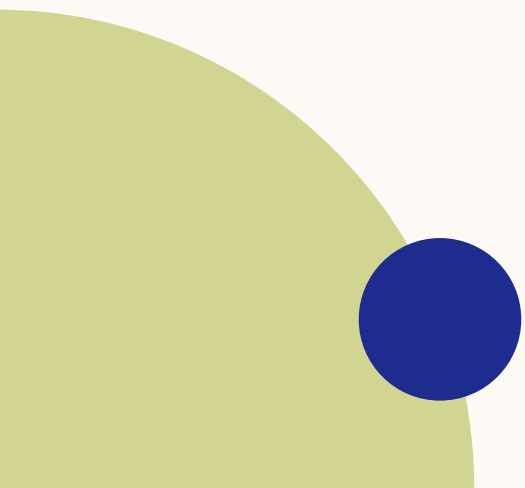
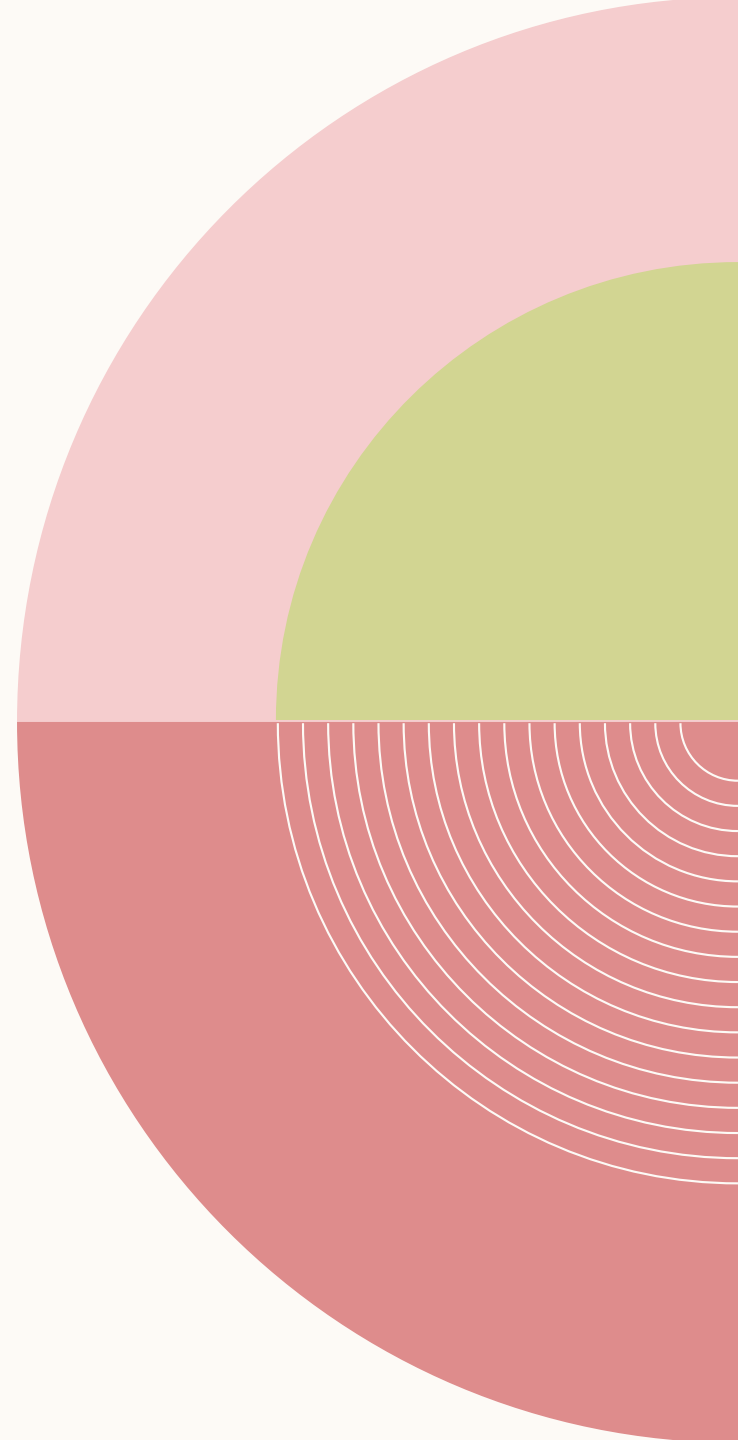
**“Capacity building is
necessary for development.”**

Lailah Gifty Akita





ANY
QUESTIONS?



THANK YOU

Hollie Hadley and Carol Gagliano

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