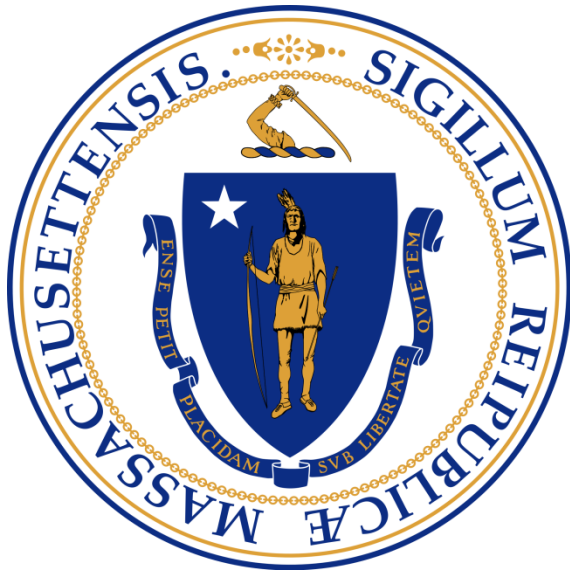




Commonwealth of Massachusetts General Court

Special Legislative Commission on Postpartum Depression

2016 Annual Report

Report Submitted on June 30th 2016

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Depression

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Special Legislative Commission on Postpartum Depression
2016 Annual Report

June 30, 2016

His Excellency, Charlie Baker
Governor of the Commonwealth
State House, Room 360
Boston, MA 02133

The Honorable Senator Stanley C. Rosenberg
President of the Senate
State House, Room 332
Boston, MA 02133

The Honorable Representative Robert A. DeLeo
Speaker of the House
State House, Room 356
Boston, MA 02133

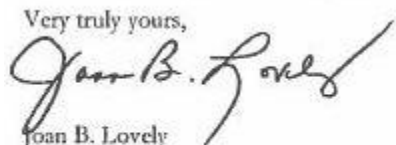
Dear Governor Baker, President Rosenberg, and Speaker DeLeo:

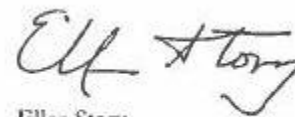
On behalf of the Special Legislative Commission on Postpartum Depression, and in accordance with Chapter 313 of the Acts of 2010, we present you with the Commission's annual report.

The Commission has continued to make excellent progress over the last year on this important issue, which would not have been possible without your support. The Department of Public Health (DPH) has continued to be an invaluable partner and has started to evaluate some of our PPD initiatives. MCPAP for Moms and the PPD Pilot Programs continue to support many women and families across the Commonwealth.

We are deeply grateful for your support in MassHealth's new reimbursement policy to cover the cost of PPD screening across the Commonwealth. Together, we have been able to establish and support routine screening and referral mechanisms for women in the perinatal and postpartum period across the Commonwealth. At this year's Postpartum Depression Awareness Day, we were able to showcase the different ways policy makers, providers, PPD survivors and friends have been able to weave a network of support for our mothers and families.

Finally, our PPD work in the Commonwealth is leading the way in how other states work on this issue. Some of our Commission members have been providing crucial assistance to federal policy makers and nationally-recognized professional associations to help tackle PPD. Thank you again for your support. We hope you find this report informative.

Very truly yours,

Joan B. Lovely
State Senator
2nd Essex District


Ellen Story
State Representative
3rd Hampshire District

Enabling Statute of the Commission

The Acts of 2010

Chapter 313. AN ACT RELATIVE TO POSTPARTUM DEPRESSION

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same as follows:

The department of public health may consult with health care providers, including, but not limited to, obstetricians, gynecologists, pediatricians and primary care providers, non-profits and health insurance carriers regarding postpartum depression to develop a culture of awareness, de-stigmatization and screening for perinatal depression so that residents of the commonwealth may be assured of the most effective and affordable provision of public health services possible. The department shall develop standards for measuring effective screening for postpartum depression using recognized clinical standards and best practices and shall make recommendations for health plan and health care provider data reporting. The department shall issue regulations that require providers and carriers to annually submit data on screening for postpartum depression. Following the receipt of the data, the commissioner of public health shall issue an annual summary of the activities related to screening for postpartum depression, including best practices and effective screening tools. The department shall annually file the summary with the commissioner of public health and the clerks of the house of representatives and the senate not later than June 30; provided, however, that the first report is due not later than June 30, 2011.

There is hereby established a special commission to consist of 5 members of the senate, 1 of whom shall be a member of the minority party appointed by the minority leader, 1 of whom shall serve as co-chair, 5 members of the house of representatives, 1 of whom shall be a member of the minority party appointed by the minority leader, 1 of whom shall serve as co-chair, the commissioner of the department of public health, the commissioner of the department of mental health, the commissioner of insurance, the commissioner of the department of children and families, the commissioner of early education and care, and the director of Medicaid, or their designees, all of whom shall serve as ex officio members, and 18 persons to be appointed by the governor, 1 of whom shall be a representative of the Massachusetts chapter of the National Association of Social Workers, 1 of whom shall be appointed jointly by the Massachusetts Midwives Association and the Massachusetts Affiliate of the American College of Nurse Midwives who shall be a midwife licensed to practice in the commonwealth, 1 of whom shall be a representative from the Nurses United for Responsible Services who shall be an advance practice psychiatric nurse, 1 of whom shall be a representative from the Massachusetts Coalition of Nurse Practitioners who shall be a nurse practitioner, 1 of whom shall be a representative of the Massachusetts Psychological Association who shall be a psychologist, 1 of whom shall be a representative from the children's behavioral health advisory council established in section 16Q of chapter 6A of the General Laws, 1 of whom shall be a representative from the Massachusetts

Behavioral Health Partnership or a managed care organization or managed care entity contracting with MassHealth, 5 of whom shall be representatives of the Massachusetts Medical Society appointed in consultation with their relevant specialty chapters, including a pediatrician, an obstetrician, a family physician, a psychiatrist and a child and adolescent psychiatrist, 1 of whom shall be a woman who has experienced postpartum depression, 1 of whom shall be a representative from a regionally-based nonprofit group currently serving women suffering from postpartum depression, 1 of whom shall be a representative from the Massachusetts Association of Health Plans and 3 of whom shall be representatives from commercial health insurance carriers or managed care organizations doing business in the commonwealth, is hereby established for the purpose of making an investigation and study relative to postpartum depression, including, but not limited to: (i) an assessment of current research on the subject and whether there exist evidence-based, best or promising practices on the prevention, detection or treatment of postpartum depression; (ii) a review of current policies and practices with respect to screenings for postpartum depression, including the frequency and location of screenings and training personnel administering the screenings, the availability of reimbursement and issues relative to medical necessity and third-party coverage; (iii) provision of assistance to the department of public health, other state agencies and organizations in the development of professional and public educational materials and programs on postpartum depression, in the development of referral lists for postpartum depression treatment, building on existing resources and in the designation of authorized validated screening tools; (iv) provision of assistance to the department of public health, other state agencies and organizations relative to applications for federal funding to support efforts consistent with the mission and purpose of the commission; and (v) any other matters that the commission considers relevant to the fulfillment of its mission and purpose. The co-chairs of the commission may each appoint up to 3 additional commission members to fulfill the purpose of the commission.

Said commission shall provide guidance and advice to the governor, the general court and the secretary of health and human services relative to current research on postpartum depression including, but not limited to, best and promising practices in the prevention, detection and treatment of postpartum depression and recommend policies, including legislation, to promote greater public awareness, screening and treatment of postpartum depression. The special commission may conduct public hearings, forums or meetings to gather information and to raise awareness of postpartum depression, including the sponsorship of or participation in statewide or regional conferences.

Said commission shall file an annual report at the end of each state fiscal year with the governor and the clerks of the house of representatives and the senate, who shall forward the same to the joint committee on public health and the joint committee on financial services, along with recommendations, if any, together with drafts of legislation necessary to carry those recommendations into effect. The special commission may file such interim reports and recommendations as it considers appropriate.

Approved, August 19, 2010; Amended November 2, 2015

List of Commission Members

Rep. Ellen Story, Co-Chair
Sen. Joan Lovely, Co-Chair
Kristin Alexander, Department of Children and Families, Designee
Jamie Zahlaway Belsito, Senate Co-Chair Appointment
Dr. Lee Cohen, Psychiatrist, Massachusetts Medical Society
Jessie Colbert, Representative Co-Chair Appointment
Karen Crowley, Massachusetts Coalition of Nurse Practitioners
Karin Downs, Department of Public Health, Designee
Rep. Kimberly N. Ferguson, House Member
Sen. Jennifer Flanagan, Senate Member
Elizabeth (Fluet) Murphy, Esq., Massachusetts Association of Health Plans
Liz Friedman, Representative from a regionally-based nonprofit group currently serving women suffering from postpartum depression
Mary Elizabeth Gamache, Massachusetts Midwives Association and the Massachusetts Affiliate of the American College of Nurse Midwives
Dr. Janice Goodman, the Nurses United for Responsible Services
Margaret Hannah, Representative Co-Chair Appointment
Dr. Gordon Harper, Department of Mental Health, Designee
Dr. Julie Johnston, Family Physician, Massachusetts Medical Society
Peggy Kaufman, National Association of Social Workers
Divya Kumar, A woman who has experienced postpartum depression
Kerry LaBounty, Health New England, Commercial health insurance representative
Dr. Monica Le, Director of Medicaid, Designee
Dr. Claire Levesque, Tufts Health Plan, Commercial health insurance representative
Sen. Thomas McGee, Senate Member
Dr. Tiffany A. Moore Simas, Obstetrician, Massachusetts Medical Society
Rep. James O'Day, House Member
Dr. Lisa Price-Stevens, Fallon Health, a managed care organization or entity contracting with MassHealth
Rep. Denise Provost, House Member
Sen. Richard Ross, Senate Member
Rep. Tom Sannicandro, House Member
Dr. Alison Schonwald, Pediatrician, Massachusetts Medical Society
Nancy Schwartz, Commissioner of Insurance, Designee
Dr. Jayne Singer, Massachusetts Psychological Association
Dr. Joshua Sparrow, Child Psychiatrist, Massachusetts Medical Society
Sen. Bruce Tarr, Senate Member
Eileen Terlaga, Network Health, Commercial health insurance representative
Commissioner Thomas Weber, Department of Early Education and Care
Dr. Michael Yogman, Children's Behavioral Health Advisory

Summary of Meetings and Events

First Annual Postpartum Depression Awareness Day – June 29, 2015

The first annual Postpartum Depression Awareness Day was held at in the Great Hall of the State House to raise awareness among policy makers and the general public on perinatal and postpartum depression. Lt. Governor Karyn Polito announced that MassHealth would make a commitment to reimburse for postpartum depression screening. Please see page 16 of this report for the event program.

Meeting 13 – October 14, 2015

This meeting focused on a review of the PPD Commission, its purpose and activities to date. The Commission has successfully met 13 times, collaborated with the Department of Public Health to promulgate postpartum depression screening reporting requirements, helped launch and advocated for funding for both MCPAP for Moms and the Postpartum Depression Pilot Programs, and held its first PPD Awareness Day at the State House. Commissioners mutually agreed on future goals for the PPD Commission, which include evaluating the impact of our PPD initiatives and developing a successful public awareness campaign that includes centralized resources for families and providers.

Meeting 14 – December 16, 2015

This meeting focused on developing and dividing interested Commissioners and members of the public into subcommittees to work on the next steps of the PPD Commission as outlined in the previous meeting. The following subcommittees were developed: 1) Subcommittee focused on developing a public awareness campaign, 2) Subcommittee focused on evaluating the impact of PPD initiatives. 3) Subcommittee focused on developing centralized resources for PPD and 4) Subcommittee focused on outreach to special populations with health and knowledge gaps on the impact of PPD.

Meeting 15 – January 27, 2016

At this meeting, the Commission discussed current events related to PPD, which include the United States Preventive Task Force's (USTPF) Grade B recommendation for depression screening in adults, with specific mention of screening women for depression in the postpartum period. Congresswoman Katherine Clark presented at the PPD Commission meeting on federal legislation she sponsored, Bringing Postpartum Depression Out of the Shadows Act. Subcommittees also gave brief updates on their work and their progress.

Postpartum Depression Film Screening and Panel – March 1, 2016

Representative Ellen Story and Senator Joan Lovely sponsored a screening of the film, *Dark Side of the Full Moon* to raise awareness on the barriers and gaps that women and families face to access care for postpartum depression. Jamie Zahlaway Belsito moderated a panel discussion with PPD Commissioners and friends, Annette Cycon, LICSW, Dr. Julie Johnston, Dr. Monica Le, Elizabeth Murphy, Esq., Divya Kumar, as well as the film's writer/director, Maureen Fura.

Diaper Drive at the State House – February 2016-April 2016

Representative Ellen Story and Senator Joan Lovely hosted a diaper drive at the State House to support families across the Commonwealth. The drive collected over 2,700 diapers and 4,600 wipes, which were donated to Cradles for Crayons for distribution across Massachusetts, and helped to raise awareness of diaper need in the Massachusetts State Legislature.

Meeting 16 – May 4, 2016

This meeting focused on the progress and outcomes of each subcommittee. Each subcommittee reported to the PPD Commission on recommendations for next steps for future goals of the PPD Commission.

Postpartum Depression Awareness Day – June 14, 2016

The second annual Postpartum Depression Awareness Day was held at in the Great Hall of the State House to showcase the work being done at different levels in Massachusetts and nationally to reduce barriers for women and families to access resources for perinatal and postpartum depression. Secretary Marylou Sudders spoke of the importance of supporting women and families in accessing depression treatment. Please see page 20 of this report for the event program.

PPD Commission Subcommittees – December 2015-June 2016

Four different subcommittees met about three or four times since December of 2015. Each subcommittee created a report on activities, and presented on recommendations and next steps. Please see page 12 of this report for the subcommittee reports.

Future Goals

In the coming year the Commission will continue to work on multiple projects promoting better screening, treatment, and awareness of maternal and paternal mental health challenges, as well as the dissemination of lessons learned from PPD initiatives in the Commonwealth. The Commission will continue to assist MCPAP for Moms and the PPD Community Health Center pilot programs, with the specific goal of evaluating the efficacy and lessons learned from these two initiatives. The Commission will focus on developing and ultimately launching a public awareness campaign on postpartum depression and other perinatal emotional complications. Finally, the Commission will support the Department of Public Health on multiple initiatives, including establishing a website with centralized resources on PPD for families and providers.

Appendices

I. 2015-2016 PPD Commission Subcommittee Reports

II. 2015 PPD Awareness Day Program

III. 2016 PPD Awareness Day Program

Appendix I.

2015-2016 Subcommittee Reports

Subcommittee: Centralized Resources

Members: Divya Kumar, Jessie Colbert, Margaret Hannah, Laurie Ganberg, Elizabeth Spinosa, Sarah Stone

Meetings:

December 16, 2015: Our initial meeting at the State House

February 26, 2016: Conference call with most subcommittee members

March 22, 2016: Margaret Hannah and Divya Kumar had a conference call with Beth Buxton of DPH

Summary of Activities:

We have talked about ways to organize information about resources and services for new families and consolidate this information so that it's readily accessible for different groups of people who may be seeking it. One key issue is that we don't want to re-invent the wheel and create a whole other database/resource list, because that will require a great deal of maintenance and someone to keep the list maintained and up to date. In addition, we were concerned about listing specific clinicians and providers since that could imply that we were recommending or endorsing these providers.

Much of our activities have focused around thinking about how to organize and structure all of this information; we have had to think about the different groups of people who will be looking for information and also what information will be useful and helpful to these different groups of people.

We have explored different avenues for housing this information and want to create a website, and after looking at different options for where this website could live, we are going to collaborate with DPH and will work with them to create the website. DPH has regulations around not listing specific clinicians or providers on their website, which has been another reason why we are taking a different approach.

Recommendations:

We recommend the creation of a webpage that will essentially update and replace the current DPH page on postpartum depression. The page will include general information about PPD such as prevalence, warning signs, and risk factors. We recommend setting up the webpage so that it is divided based on WHO is looking for information (medical providers/clinicians, other professionals working with moms and families, and moms and families themselves); in effect, someone looking at this webpage will be put into a "lane" and will be able to access resources based on their "lane". We will include different resources based on the population category but will include a diverse range of resources that may be useful to moms and families. Instead of providing names of individual providers and resources, we will instead provide links to larger resources that are regularly maintained and updated and contain specific names and services; examples of such resources include the PSI Warmline, Doula Match, Zip Milk, etc.

Next steps:

We are in the process of finding an intern for the summer who will sit at William James and be supervised by Margaret Hannah. The intern will help the subcommittee identify resources that will be included in our webpage. We will continue to collaborate with Beth Buxton and the folks who create and maintain the webpages at DPH in order to move forward.

Subcommittee: Evaluation of current PPD initiatives

Members: Beth Buxton, Nancy Byatt, Lee Cohen, Annette Cycon, Hafsatou (Fifi) Diop, Karin Downs, Chris Fluet, Mary Fluet, Mary Gamache, Janice Goodman; Margaret Hannah, Cindy Liu, Tiffany Moore-Simas, Anna Roy, Sarah Stone, John Straus, Emily Lu, Yaminette Diaz-Linhart (ex officio), Gordon Harper (chair)

Meetings: January 6, January 13, March 14, April 4, 2016

Summary of Activities:

- 1) Developed a Summary of what the Subcommittee aims to achieve for the Commission (attached).
- 2) Identified gaps and opportunities in current knowledge base (listed in Summary).
- 3) Discussed relationship between evaluating *services* and patient-level *outcomes*.
- 4) Developed three-part proposal (Three Approaches) for measuring the effectiveness of the Commission's activities (attached).

Findings:

- 1) What we've learned from MCPAP for Moms (M4M) July 2014 – March 2016:
 - a. OBs enrolled: 843 providers in 93 practices (54% of MA OB practices)
 - b. Women served: 1254. That is, we reached 7% of a target population of nearly 18,000 at risk for PPD (assuming PPD rate of 14% among nearly 130,000 live births in these 21 months). And the number served is steadily rising.
 - c. Consultations: 1086 by phone; 92 face-to-face
 - d. Cases provided care coordination: 1586
 - e. Medication history: 25% no prior medication; 10% started new
 - f. What happened: 38% care coordination with patient; 39% to outpatient treatment; 19% to new psychiatrist
 - g. Trainings and Grand Rounds: 76
- 2) Other programs (Community Perinatal Support Models (CPSMs), PPD Pilots, Mother Woman): some data mostly through DPH, although service tracking inconsistently supported

Recommendations:

- 1) Entire Commission to discuss the options identified in the attached Proposal.
- 2) Review strategies for tracking processes and outcomes more consistently

Next steps:

- 1) Continued discussion with the Commission about what level of follow-up to recommend to Legislators and other stakeholders.

Subcommittee: Outreach to Special Populations

Members: Kristin Alexander, Kathleen Biebel, Beth Buxton, Gail DeRiggi, Yaminette Diaz-Linhart, Karin Downs, Lisa Price-Stevens, Michael Yogman

Meetings: 12/16/2015, 01/28/2016, 02/25/2016, 04/14/2016

Summary of Activities:

The subcommittee discussed special populations of interest, including fathers, women of color, teen mothers, homeless families, and systems integration of PPD into other state agencies and initiatives. The focus of the group became to leverage existing systems (DCF, DPH, and DMH) and increase PPD capacity within those systems.

1. Discussed and analyzed the policy lessons from the opiate crisis that may be applicable to PPD.
2. We invited the Department of Housing and Community Development to our PPD Commission meetings, as well as the new DCF Medical Director.
3. DPH is working on disseminating guidance on PPD screening to providers.
4. Discussed training and workforce development for DCF to increase PPD awareness.

Recommendations:

1. Increasing PPD capacity at DCF:
 - a. DPH brochures for welcome baby bags for parents
 - b. One-page information sheet for DCF staff
 - c. In-service training on PPD for DCF staff by DPH
2. Disseminate DPH resources on PPD to the Coordinated Family and Community Engagement grantees part of EEC.
3. PPD Commission press release to providers from about PPD screening using DPH's existing guidance and resources.
4. Connect with public awareness subcommittee about designing campaign to reach special populations of interest

Next steps:

The subcommittee will pursue the recommendations listed above.

Subcommittee: Public Awareness

Members:

Representative Ellen Story, Senator Lovely (Anna Roy, staff), George Atanasov, AbbVie, Inc. Children's Trust, Jamie Zahlaway Belsito, National Coalition of Maternal Mental Health, Candice Brothers, Postpartum Progress, Susan Petcher, Postpartum Progress, Michael Visocchi, Comcast

Meetings:

December 16, 2015, January 7, 2016 (conference call), April 11, 2016 (conference call)

Summary of Activities:

In our meetings we have discussed the scope of our charge and what is involved with constructing a public awareness campaign. Generally, we have divided our charge into five categories:

- 1) Identifying a destination to which the public awareness campaign will direct individuals for more information and resources;
- 2) Identifying the audiences to ensure that the messaging is not so overly broad that no one can quite relate, but ensuring that diverse populations can relate to targeted messaging as well;
- 3) Developing messaging that will educate and empower the audience(s) as well as destigmatize PPD as an issue generally;
- 4) Delivering the message, either through social media campaign, advertising campaign, or another delivery method; and
- 5) Developing a budget for the campaign.

Recommendations:

- ❖ Develop a centralized vision that brings together the work and public awareness messaging that already exists across Massachusetts
- ❖ Work with Special Populations Subcommittee to ensure that messaging reaches diverse audiences
- ❖ Work with Centralized Resources Subcommittee to ensure "destination" for audience is consistent
- ❖ Once a messaging and delivery plan is developed, we recommend securing financial resources to implement the public awareness campaign statewide

Next steps:

- ❖ Schedule regular meetings to continue the work
- ❖ Research:
 - "Assess where everyone is at" – invite groups that are doing similar work into the conversation to ensure the work is meaningful and well integrated across the Commonwealth
 - Evaluate page views and engagement on relevant websites, social media campaigns, and hashtags
- ❖ Determine resource destination that statewide public awareness will direct individuals to:
 - Research feasibility of existing websites
 - Work with Centralized Resources Subcommittee
- ❖ Develop clear and consistent messaging
 - Goals: reassure mothers that they are not alone and that there is help available; empower mothers to talk to doctors about mental health the same way that they would about all other aspects of pregnancy
 - Messaging process:
 - Develop messaging ideas within the subcommittee
 - Solicit feedback on messaging ideas from statewide groups and Commission
 - Partner with mental health counselor to solicit feedback and finalize messaging
 - Finalize messaging
- ❖ Distribution
 - Develop distribution plan for messaging – social media, advertising, etc.
 - Develop budget

Appendix II.

2015 Postpartum Depression Awareness Day Program

Bringing PPD

Into the Light:

***Decreasing Stigma, Supporting Families and
Implementing Policy Change in Massachusetts***

Monday, June 29, 2015

Great Hall

12:00pm – 3:00pm

Hosted By

Senator Joan Lovely

Representative Ellen Story

Senator Bruce Tarr

Sponsored by the Ipswich Birth to Three Family Center

#IntoTheLight

Speaking Program

Welcoming Remarks: Representative Ellen Story
Senator Joan Lovely
Senator Bruce Tarr
Lieutenant Governor Karyn Polito

Speakers:

Claudia M. Gold, MD - Dr. Claudia Gold is a pediatrician and writer with a long-standing interest in addressing children's mental health needs in a preventive model. She has practiced general and behavioral pediatrics for over 20 years, and currently specializes in early childhood mental health. She is the author of *Keeping Your Child in Mind: Overcoming Defiance, Tantrums and Other Everyday Behavior Problems by Seeing the World through Your Child's Eyes*, and the forthcoming *The Silenced Child: Listening for Stories that Need to be Told*. She is a graduate of the UMass Boston Infant-Parent Mental Health Post-Graduate Certificate Program, and is on the faculty of the Brazelton Institute, the Berkshire Psychoanalytic Institute and the Austen Riggs Center.

Jamie Zahlaway Belsito - Jamie Zahlaway Belsito is a former federal lobbyist and business immigration expert. She is currently a stay at home mom ("SAHM") of two girls, ages two and five, a member of the North Shore Postpartum Depression Task Force and a maternal mental health advocate.

Nancy Byatt, DO, MS, MBA, FAPM - Dr. Byatt is a perinatal psychiatrist focused on improving health care systems to promote maternal mental health. She is an Assistant Professor at UMass Medical School in the Departments of Psychiatry and Obstetrics and Gynecology. She has a Career Development Award that funds her research to help women pregnant and postpartum access and engage in perinatal depression treatment in obstetric settings. Her clinical and academic achievements have led to numerous peer-reviewed publications and national awards. She is also the Founding and Statewide Medical Director of MCPAP for Moms, a program that provides mental health consultation and care coordination for medical providers serving pregnant and postpartum women.

Liz Friedman, MFA - Liz became a mother in 2002, founded the Postpartum Support Initiative of MotherWoman in 2007, and currently advocates for fair policies for mothers as Program Director of MotherWoman. She developed the MotherWoman Support Group Model with Annette Cycon, which provides a safe forum for mothers to speak their truths. Liz serves on the MA Postpartum Depression Commission, is a co-investigator on research pertaining to postpartum depression, speaks nationally on issues of postpartum depression and in 2010 won the TEDWoman's contest for her outstanding work on behalf of mothers.

Divya Kumar, Sc.M., CLC, PPD - Divya Kumar holds a Master of Science from the Harvard School of Public Health and is a certified postpartum doula and lactation counselor. She currently works at Southern Jamaica Plain Health Center overseeing the comprehensive perinatal support program, From the Beginning. In addition, she facilitates several support groups for new parents and recently co-founded the Every Mother Project, an initiative that provides training and support for women's health professionals around screening for and responding to perinatal emotional complications.

Participating Organizations

- Beverly Hospital
- Birth to Three Family Center
- The Brazelton Institute
- The Brazelton Touchpoints Center
- Cape & Islands Maternal Depression Task Force
- The Center for Early Relationship Support - Jewish Family & Children's Services
- Core Values, LLC
- The Developmental Medicine Center, Boston Children's Hospital
- Emerging Leaders Program
- Every Mother Project
- Family Health Center of Worcester
- Freedman Center for Child and Family Development, William James College
- Greater Lynn Postpartum Depression Task Force
- LC Home Visits
- Lynn Community Health Center
- Massachusetts American College of Obstetricians & Gynecologists
- Birth to Six, Inc., Massachusetts Association for Infant Mental Health
- Mass. Department of Mental Health
- Mass. Department of Public Health
- Mass. Special Legislative Commission on Postpartum Depression
- MCPAP for Moms
- Center for Women's Mental Health, Massachusetts General Hospital
- MotherWoman
- Neighborhood Health Plan
- North Shore Postpartum Depression Taskforce
- Northern Essex WIC Program
- Postpartum Progress
- Postpartum Support International (PSI) of Massachusetts
- Southern Jamaica Plain Health Center
- Strong Roots Counseling
- Winchester Hospital
- Women's Mental Health Division, Brigham and Women's Hospital
- Worcester County Perinatal Support Network

With the Support of

- Senator Sonia Chang-Diaz
- Senator Sal N. DiDomenico
- Senator Linda Dorcena Forry
- Senator Robert L. Hedlund
- Senator Barbara L’Italian
- Senator Thomas M. McGee
- Senator Michael O. Moore
- Senator Karen E. Spilka
- Representative Brian M. Ashe
- Representative Ruth B. Balser
- Representative Jennifer E. Benson
- Representative Leah Cole
- Representative Claire D. Cronin
- Representative Diana DiZoglio
- Representative Denise C. Garlick
- Representative Bradford Hill
- Representative Leonard Mirra
- Representative Jerald A. Parisella
- Representative Denise Provost
- Representative Angelo J. Puppolo, Jr.
- Representative Daniel J. Ryan
- Representative Theodore C. Speliotis
- Representative Aaron Vega
- Representative Chris Walsh

Appendix III.

2016 Postpartum Depression Awareness Day Program

Bringing PPD Into the Light:

Reducing Barriers, Decreasing Stigma, and Weaving a
Network of Support for Mothers Across the Commonwealth

Tuesday, June 14th
State House
Great Hall
12:00-2:30pm

Hosted by:
Representative Ellen Story,
Senator Joan Lovely,
and Senator Bruce Tarr



Cape & Islands
Maternal Mental
Health Taskforce

#IntoTheLight

Speaking Program

Welcoming Remarks: **Representative Ellen Story**, House Chair, Special Legislative Commission on Postpartum Depression

Senator Joan Lovely, Senate Chair, Special Legislative Commission on Postpartum Depression

Speakers: **Dr. Jayne Singer, PhD** - Dr. Singer is a clinical psychologist with extensive experience working with a diverse array of children and families in hospital, therapeutic school, and community-based settings. She provides evaluation, intervention, and consultation services within an overall preventive model of infant-family mental health. Her focus of prevention and intervention within the realm of PPD is on the contribution of the infant to the parent-child interactional experience to enhance those interactions as protective factors in the emotional health of the whole family. Dr. Singer's current positions include: Clinical Psychologist, Division of Developmental Medicine; International Trainer: Brazelton Touchpoints Approach; Newborn Behavior Observation, Boston Children's Hospital Boston; and Asst. Professor Pediatrics and Psychiatry, Harvard Medical School.

Cate Johannessen, BA, BSN, RN, CLC – Cate has been working as a birth and postpartum doula for over 7 years and has been present for the birth of over 180 children in hospitals, birth centers and at home. Her commitment to maternal child health includes working as a childbirth educator and certified lactation counselor. She received her nursing degree from Simmons College in 2011, with future plans to become a nurse midwife. Cate is one of the co-founders of The Every Mother Project, an organization providing support and training for birth and postpartum professionals around screening for and responding to perinatal emotional complications in clients.

Maria Merced, OB/GYN case manager – Maria Merced is an OBGYN case manager who has been working in the Lynn Community Health Center (LCHC) with the Latina Population for over 19 years. She has facilitated many Latina groups in the Lynn Community, as well as worked with behavioral health providers and medical providers on a daily basis. She is now the co-facilitator of the Mother Woman Spanish Group Model run at Lynn Community Health Center.

Dr. Yaquelin Ocaña Psy.D., Pediatric & OB/GYN Clinician – Dr. Yaquelin Ocaña went to the Massachusetts School of Professional Psychology, currently William James College in Newton, MA, and remained at the Lynn Community Health Center (LCHC) after her post-doctoral training there over 2 years ago. She has worked with the Hispanic population since the start of her career and continues this mission as Pediatric and OB/GYN psychotherapist at the Lynn Community Health Center, as well as co-leading the MotherWoman Spanish Group with Maria Merced.

Margaret Rice, NP, Warrior Mom – Margaret Rice is a Boston based Warrior Mom with Postpartum Progress. After experiencing antenatal and postpartum depression and anxiety in 2014, she has been advocating for mothers with perinatal mood and anxiety disorders in the Boston area. Margaret is also a Board Certified Nurse Practitioner specializing in Adult Primary Care, Women’s Health, Orthopedics and Substance Abuse.

Katherine Stone, CEO, Postpartum Progress – Katherine is a survivor of postpartum anxiety and OCD, and the founder of Postpartum Progress, a national nonprofit that raises awareness and provides peer support for women with maternal mental illness. She has received numerous awards for her maternal mental health advocacy work, including being selected as a WebMD Health Hero. This year, Katherine was named by Working Mother magazine as one of the Top 20 Social Media Moms, alongside such luminaries as JK Rowling, Chelsea Clinton, Priscilla Chan Zuckerberg and Christy Turlington.

Dr. Michael Yogman, MD, FAAP – Dr. Michael Yogman is a pediatrician in private practice in Cambridge, Massachusetts and Assistant Professor of Pediatrics at Harvard Medical School. Currently, he is Chair of the Board of Trustees of the Boston Children’s Museum, Chair of the Massachusetts American Academy of Pediatrics Child Mental Health Task Force and Chair of the National American Academy of Pediatrics Committee on Psychosocial Aspects of Child and Family Health. In October of this year he will receive the AAP Child Health Advocacy Award for his work on postpartum depression.

Marylou Sudders, ACSW, MSW; Secretary, Executive Office of Health and Human Services – Appointed as Secretary of the Executive Office of Health and Human Services (EOHHS) by Governor Charlie Baker in January 2015, Marylou Sudders leads the largest executive agency in state government, a \$21 billion state budget with 22,000 public servants, and oversees critical services that touch almost one in four residents of the Commonwealth. Professionally trained as a social worker, Sudders has dedicated her life to public service and to some of our most vulnerable citizens. She has been a public official, provider executive, advocate and college professor. Sudders has been honored and recognized by many groups for her contributions and commitment to public service.

Closing Remarks: Senator Joan Lovely

Participating Organizations

- Beverly Hospital, Lahey Health
- Birth to Three Family Center, Ipswich, MA
- Cape & Islands Maternal Depression Task Force
- Center for Families (Cambridge Coordinated Family and Community Engagement Grantee/ Children Trust Family Center)
- Center for Women's Mental Health, Massachusetts General Hospital
- Commonwealth Research Center Parent Support Program at Beth Israel Deaconess Medical Center
- Every Mother Project
- Family Health Center of Worcester
- First Connections – Concord Coordinated Family and Community Engagement Center
- Greater Lynn Postpartum Depression Task Force
- Holyoke Health Center
- Jamaica Plains Community Health Center
- LC Home Visits
- Lynn Community Health Center
- Massachusetts Department of Public Health
- Massachusetts Special Legislative Commission on Postpartum Depression
- MCPAP for Moms
- MotherWoman
- MotherWoman Community Perinatal Support Coalitions
- North Shore Medical Center, Partners
- North Shore Postpartum Depression Task Force
- Postpartum Progress
- Postpartum Support International
- RESOLVE New England
- Screening for Mental Health, Inc.
- The Children's Trust
- William James College, Interface Referral Service
- Women, Infants and Children (WIC) Nutrition Program
- Women's Mental Health Division, Brigham and Women's Hospital