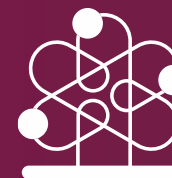


# The 4th Trimester: Supporting Optimal Health and Development for Mothers and Babies

February 20, 2020

*NCIT Capacity-Building Hub*



National  
Collaborative  
for Infants  
& Toddlers™

Powered by the Pritzker Children's Initiative

# Key Takeaways

- ✓ Participants will hear why the 4th trimester is a critical time for the growth and development of the mother-baby dyad.
- ✓ Participants will gain a deeper understanding of the policy, care and system challenges and opportunities in the 4th Trimester.



**Andrea Palmer**  
Program Manager  
Pritzker Children's Initiative



**Dr. Sarah Verbiest**, DrPH, MSW, MPH, Director of the Jordan Institute for Families, UNC School of Social Work, and Executive Director, UNC Center for Maternal and Infant Health



**Nkechi Charles, MA**, Doctoral Candidate, UNC Department of Maternal and Child Health

## Featured Webinar Presenters

*NCIT Capacity-Building Hub*



# Pritzker Children's Initiative: Prenatal-to-Three Outcomes Framework

*NCIT Capacity-Building Hub*

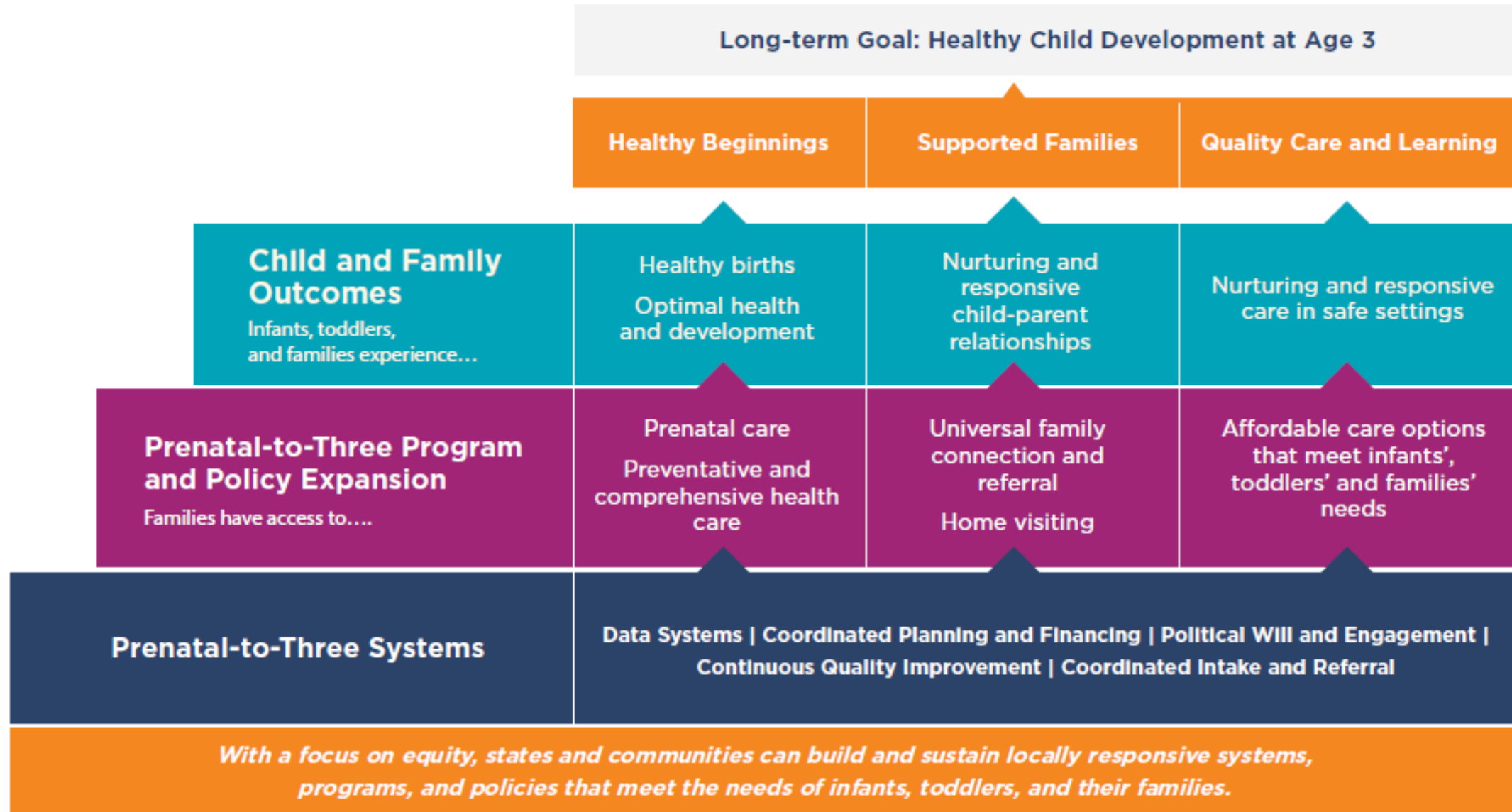


**Pritzker Children's Initiative Vision: Every child reaches kindergarten ready to learn**



# On Track for Kindergarten Readiness:

## *Prenatal to Three Outcomes Framework*



# The 4<sup>th</sup> Trimester Project at the Jordan Institute for Families at the University of North Carolina at Chapel Hill

*NCIT Capacity-Building Hub*



*4th trimester*  
**PROJECT**

# The 4<sup>th</sup> Trimester: Supporting Optimal Health and Development for Moms and Babies

February 20, 2020

**Sarah Verbiest, DrPH, MSW, MPH and Nkechi Charles, MA**  
Jordan Institute for Families – UNC School of Social Work



SCHOOL OF MEDICINE  
Center for Maternal and Infant Health



SCHOOL OF SOCIAL WORK  
Jordan Institute for Families



# Objectives

- Participants will be able to discuss why it is important to focus on both mother and baby during the months after birth.
- Participants will have a deeper understanding of the policy, care and system challenges and opportunities in the 4<sup>th</sup> Trimester.

We have no conflicts to disclose.



# OUR Village

Our work represents a collaboration of diverse professionals, community leaders, and new mothers from across the country. We are working to center the voices of women of color so that all mothers are seen, heard, and respectfully treated.



*Postpartum in the U.S.*

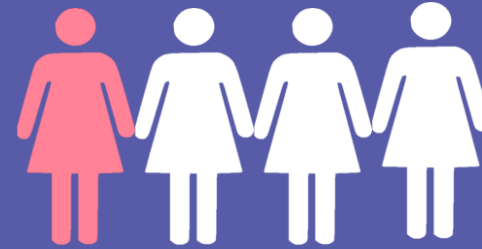
# The Impact

**2x**

*The number of women who lose their lives giving birth in America has nearly doubled over the last 25 years.*

**1.6**  
million

*1.6 million new mothers do not receive a postpartum visit.*



*1 IN 4 MOMS  
in the US returns to work  
just **10 days after**  
**childbirth***



*85%+ of mothers who experience symptoms of Postpartum Depression did not get help*





A white silhouette of the United States map is centered on a solid red background. Inside the map, the text "4,000,000 NEW MOTHERS EACH YEAR" is written in a dark blue, serif font. To the right of the map, there are three realistic-looking seashells with purple, pink, and white stripes, arranged in a small cluster.

**4,000,000**

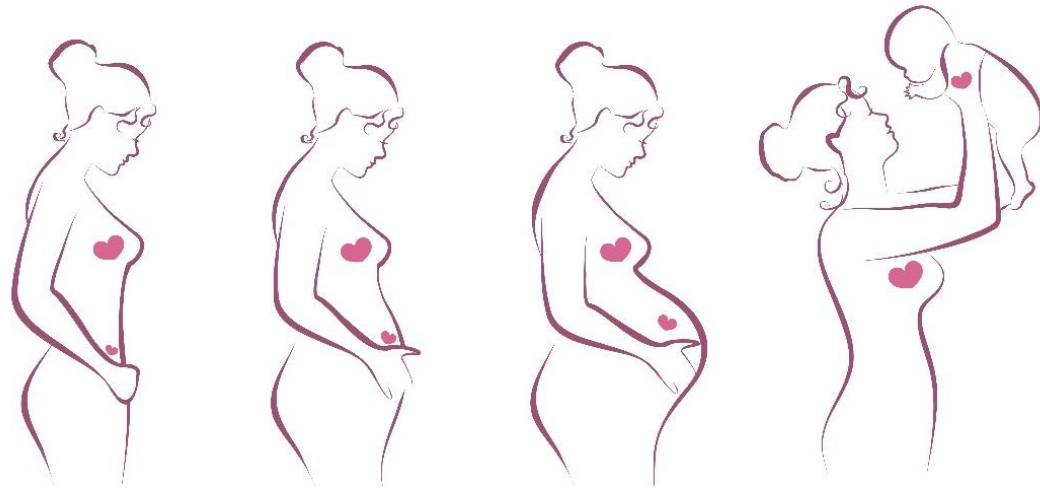
**NEW MOTHERS  
EACH YEAR**

**with a universal story**



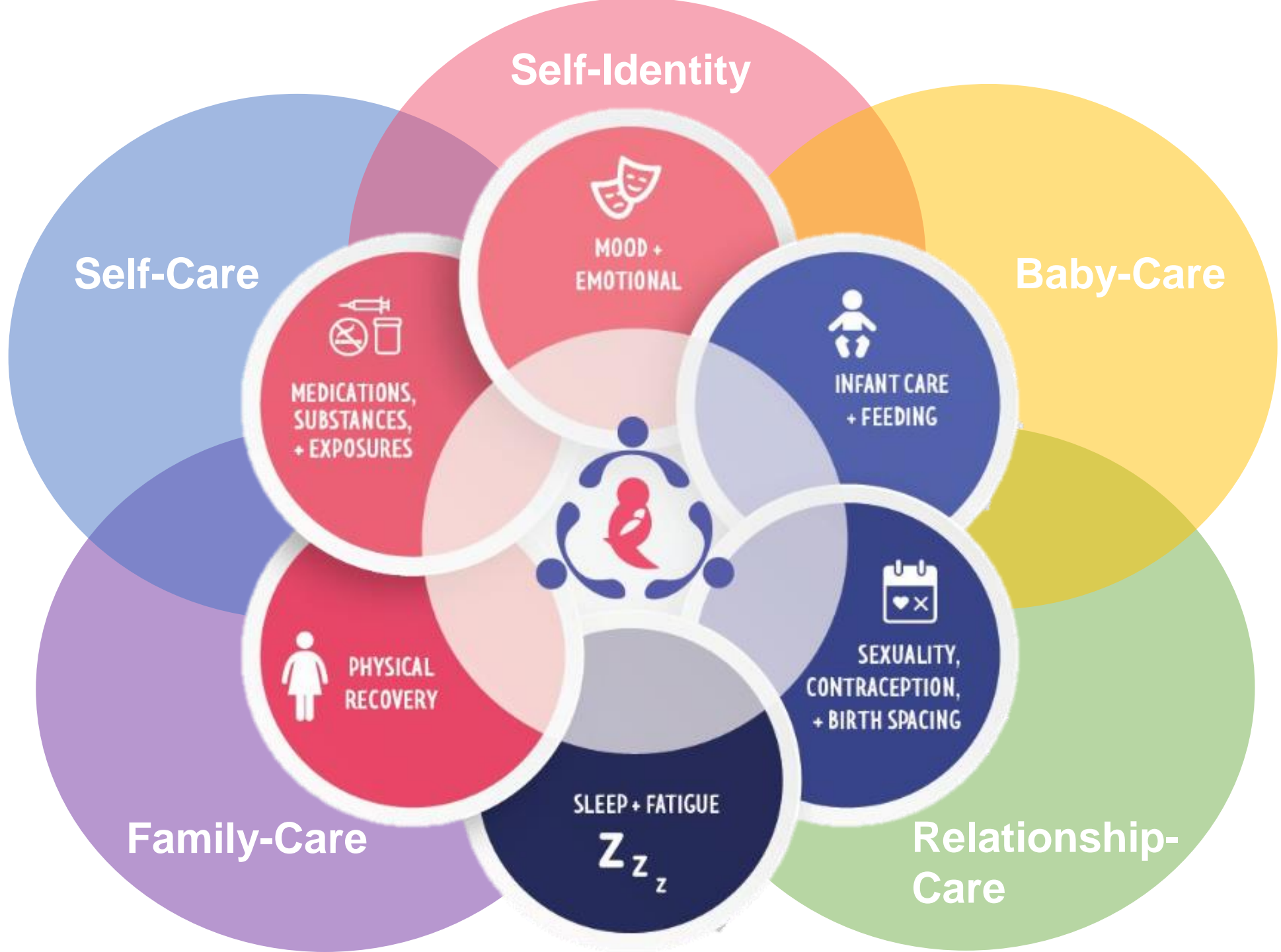
# The Postpartum Period Matters

- Infants and mothers are interdependent and shape each other
- Birth of a mother as well as a child



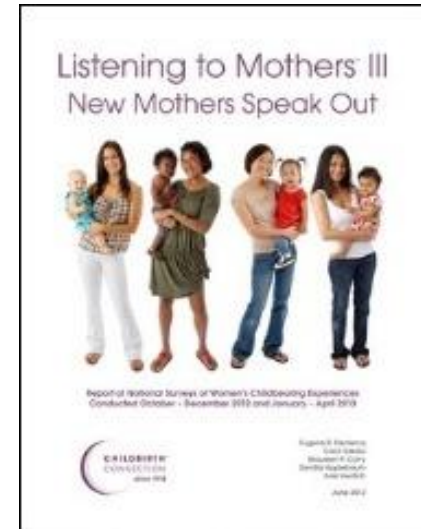
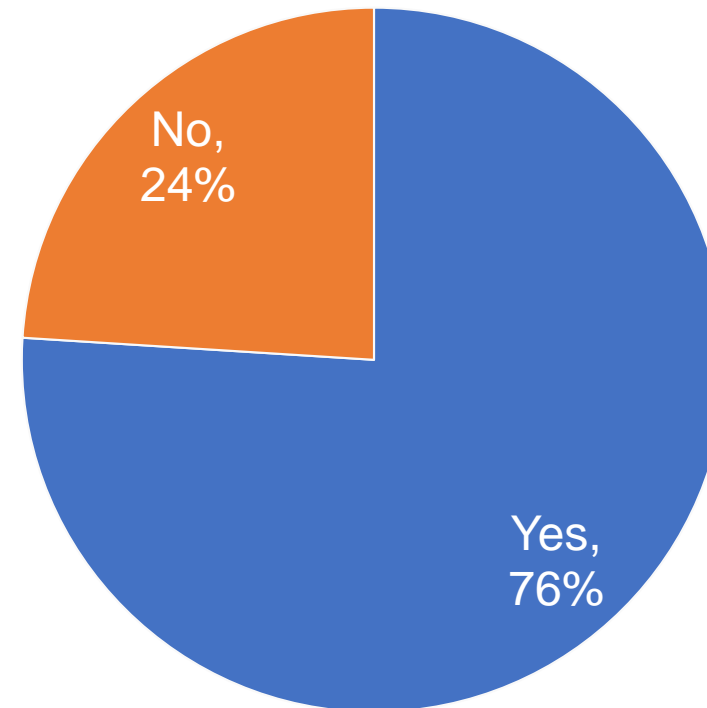
Kitzinger S. The fourth trimester? *Midwife Health Visit Community Nurse* 1975;11(4):118-121.





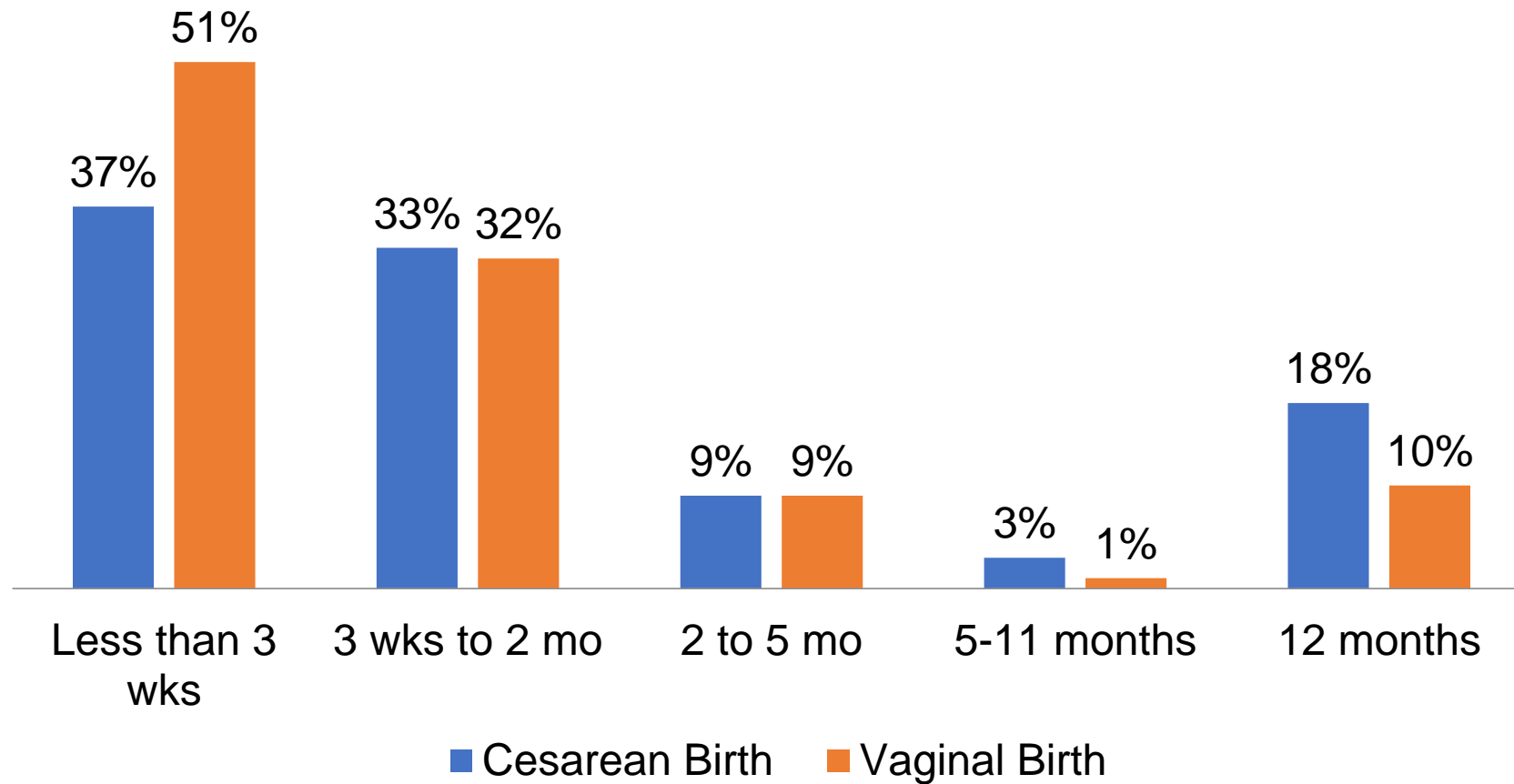
# Care Gaps

Did you have a telephone number of a care provider to contact about concerns in the first two months after birth?

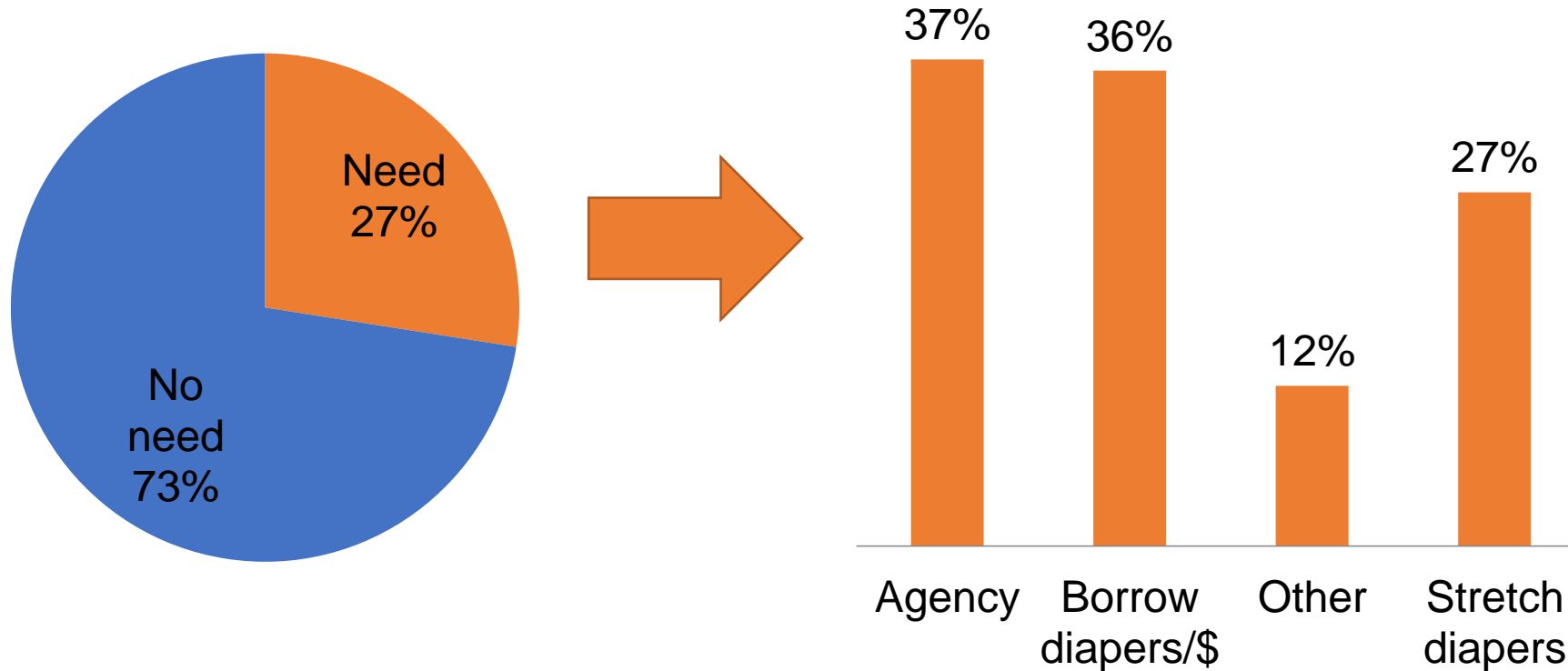


# Unrecognized Suffering:

## Duration of pain after birth



# Material Support Matters



Providing low-income families with some free diapers improves:

- Parental emotional well-being
- Child health
- Opportunities for childcare, work, and school attendance





# Special Populations

- Mothers who have experienced an infant loss
- Mothers who are incarcerated
- Mothers who need substance use services
- Mothers with infants receiving care in a NICU were:
  - 3x more likely to be classified as having severe maternal morbidity
  - Significant risk for postpartum depression





# Her Fears

If I score too high on  
the depression  
screen, will they  
send me to an  
institution?

Are they going to  
take my baby away?

Am I a good mother?



# Consequences of Inadequate Care



- Breastfeeding initiation 79% vs continuation 49% (6 mos) and 27% (12 mos)\*
- Postpartum depression (nearly 1:5 moms)
- Tobacco recidivism (up to 70%)
- Unmet need for chronic disease management / risk reduction
- Suffering due to unaddressed pain
- Less than 6 months between pregnancies
  - Increased risk for preterm birth (40%), low birth weight (61%), being small for gestational age (26%), for maternal complications
  - Impacts family finances and the development of older baby

\* Varies by population with moms of color less likely to receive the supports they need to continue





# Key Challenges

- » Lack of timely, relevant, credible postpartum information
- » Care is too little and too late and for some – not available
- » Limited access to resources & services
- » Women have to figure out what they need and how to get it. Systems are NOT mom-centric
- » Biased, judgmental, misaligned clinical encounters
- » Cultural & social stigmas & unrealistic expectations





*Why?*

“Motherhood should not  
mean risking my health,  
happiness, or life.”

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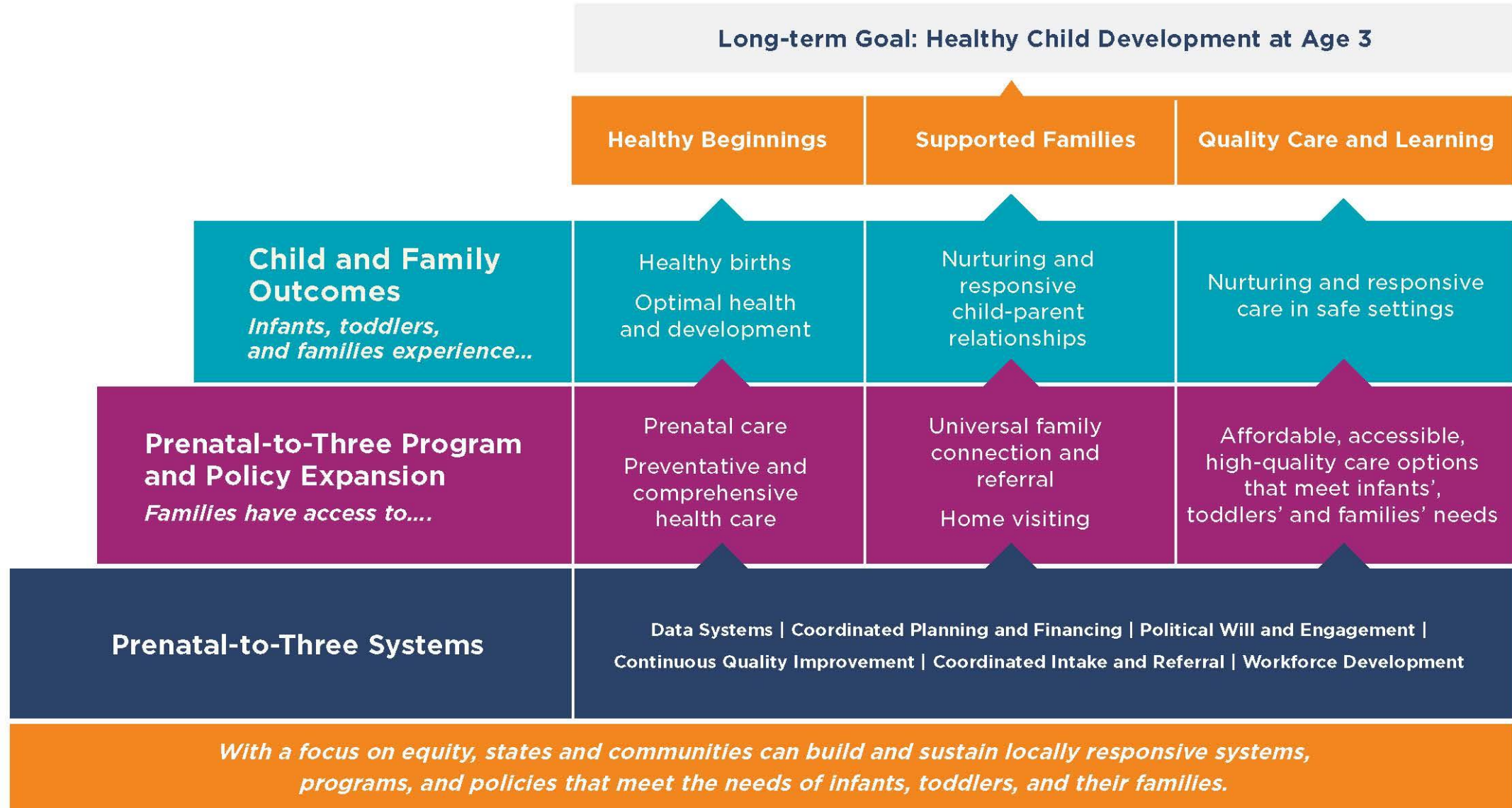
# NKECHI'S STORY





# Prenatal to Three Outcomes Framework:

## *On Track for Kindergarten Readiness*



# Engage Fathers

Strong evidence about early attachment for fathers and their significant role in language development and maternal support.

There is limited research about the impact of new parenthood on the health of partners.

Partners are often overlooked by providers, home visitors and others even though their role is critical. How do local policies engage OR disenfranchise dads?



# Shared Decision Making

## Brings at least two experts to the table

- Women/Families are experts in their experiences, what works for them and what matters most to them.
- Provider is an expert in the clinical evidence.



## Honors both experts' knowledge

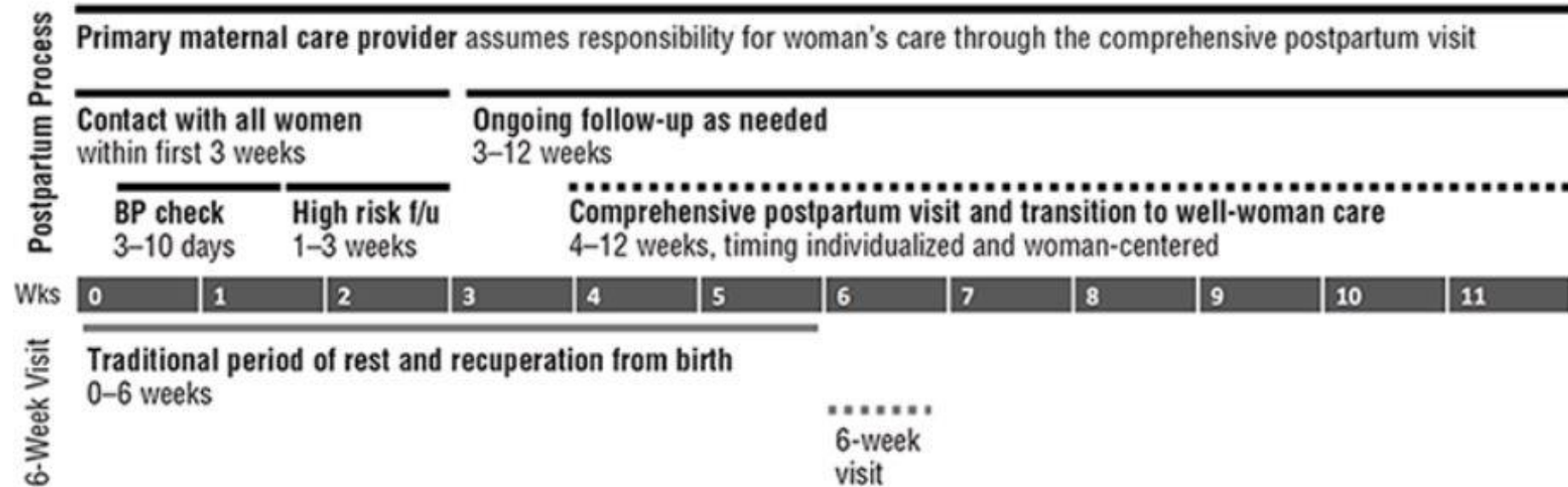
- Through this process of informing and involving the patient, high-quality decisions that align with patient preferences are achievable.

The way a mother parents is ultimately her choice, and such decisions should be **respected**. Elevate their strengths as mothers!





# NEW ACOG Postpartum Guidelines



**Figure 1.** Proposed paradigm shift for postpartum visits. The American College of Obstetricians and Gynecologists' Presidential Task Force on Redefining the Postpartum Visit and the Committee on Obstetric Practice propose shifting the paradigm for postpartum care from a single 6-week visit (bottom) to a postpartum process (top). Abbreviations: BP, blood pressure; f/u, follow-up. ➡



The American College of  
Obstetricians and Gynecologists  
WOMEN'S HEALTH CARE PHYSICIANS

**COMMITTEE OPINION**

# Strategies

- Access to comprehensive health care services, including specialists, postpartum doulas, 24/7 nurse hotline, stress management, nutritionists is essential.
  - Expansion of Medicaid for a year postpartum is baseline.
- Increased reimbursement for maternal care services.
- Extension of Centering programs to provide ongoing support for new mothers/parents.
- Value-based Payments and Quality of Care Standards.
- Improved training on postpartum needs / communication / bias.







# Postpartum Care Plan and Team

- **Guidance** on what to expect after birth
- Lining up **community** of support
- **List** of postpartum providers, scope of practice, and contact information in advance
- **Screen** every dyad for unmet needs
  - Recognize trauma
- **Ask** mothers what they prioritize
  - Open-ended questions, to understand **maternal goals**

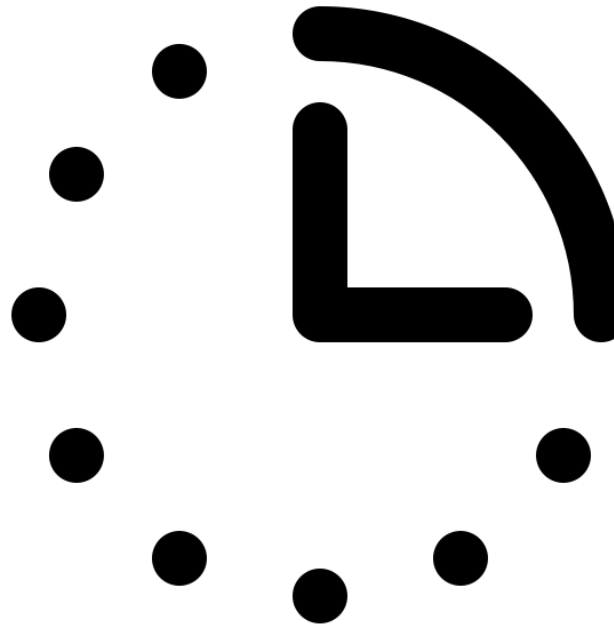


# 15 minutes of anticipatory guidance...

- Feeling sad and blue/depressive symptoms
- Bleeding
- C-section site pain
- Episiotomy site pain
- Urinary incontinence
- Breast pain
- Back pain
- Headaches
- Hair loss
- Hemorrhoids
- Infant colic



Elizabeth  
Howell



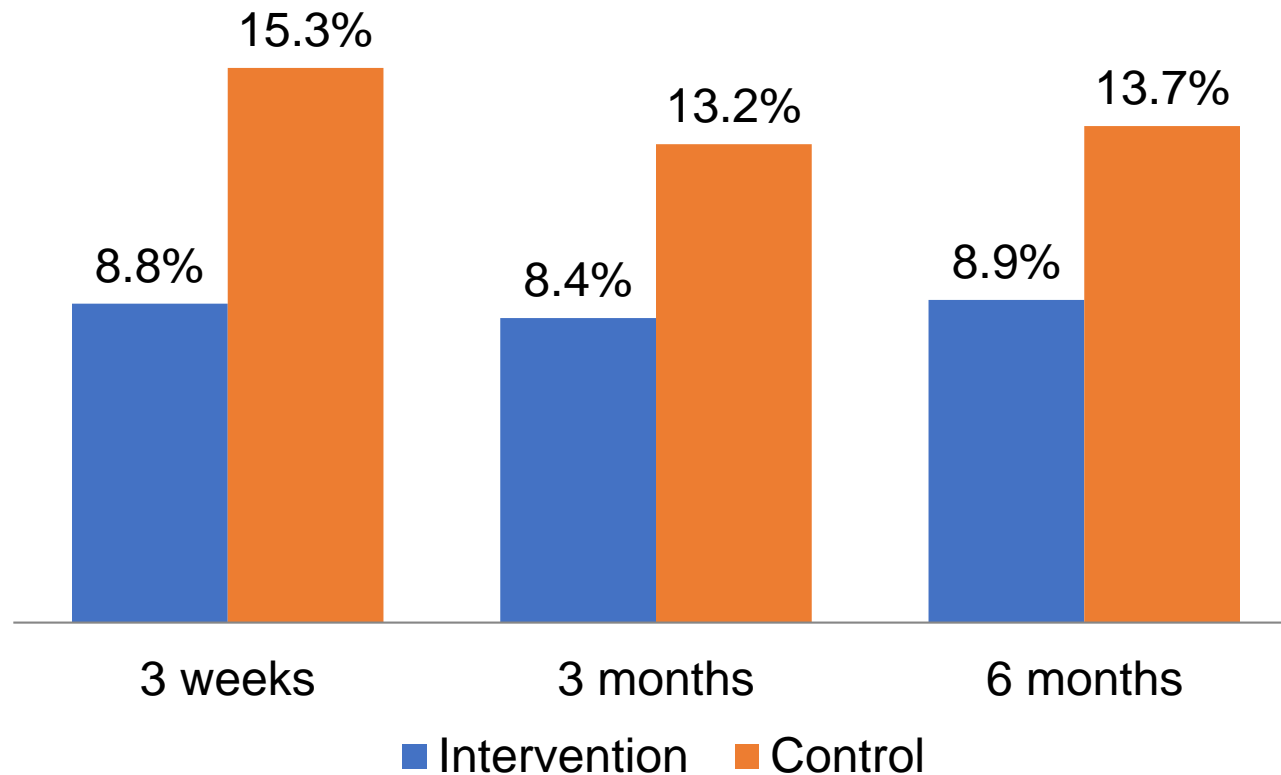
Created by Alexander Wiefel  
from Noun Project



...reduced depression symptoms through  
6 months postpartum



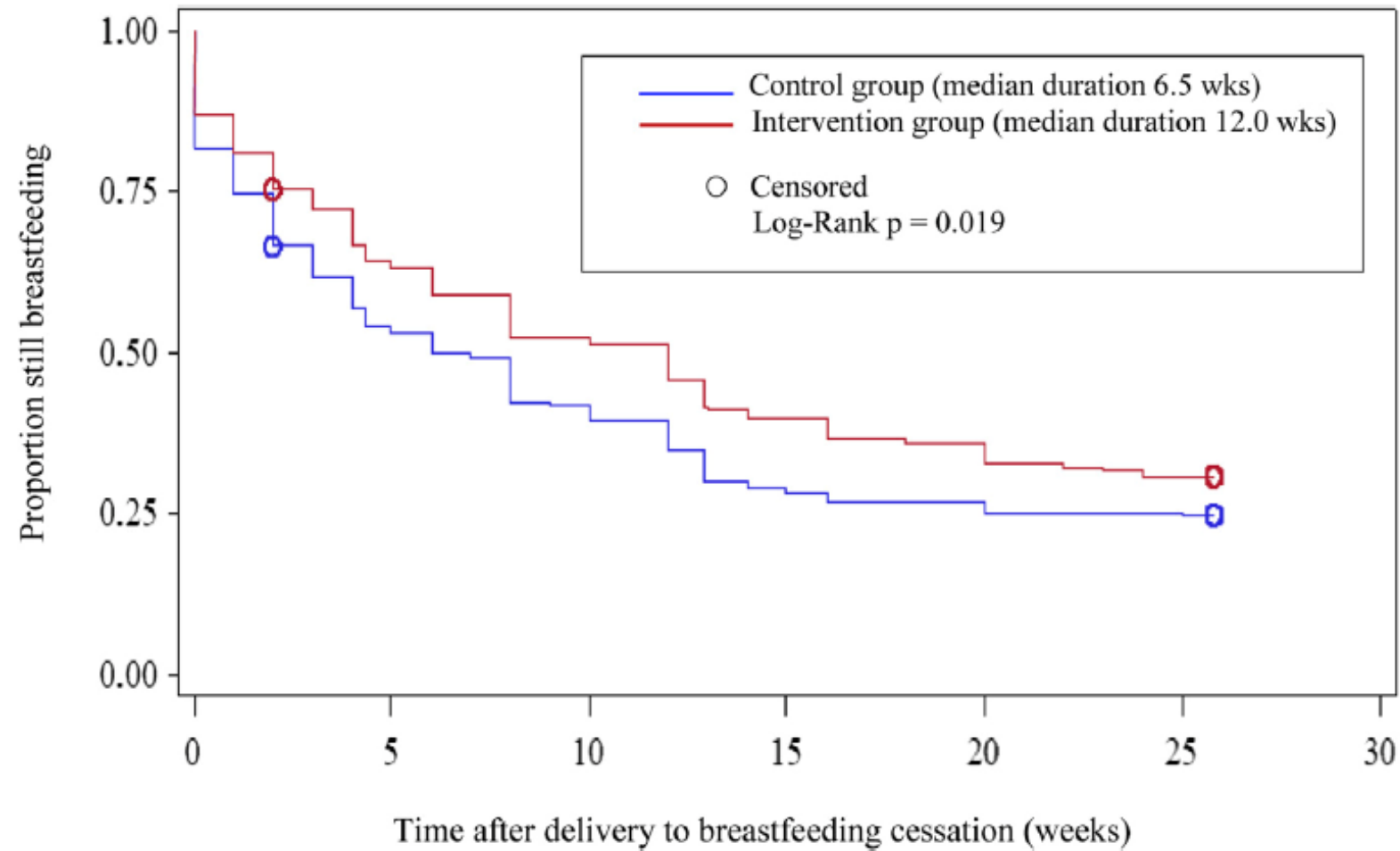
Elizabeth  
Howell



... and increases breastfeeding duration



Elizabeth  
Howell



## Challenges in accessing self-care and postpartum health-related information

“

*“When I had my babies, no one had answers for me. I felt very alone.”*

“

*“There were not any formal places for information about what to expect during recovery from a maternal near-death event.”*

“

*“I searched for help, but got no answers.”*

“

*“Sadly, I was only given information because I knew what questions to initiate myself.”*







*Introducing...*

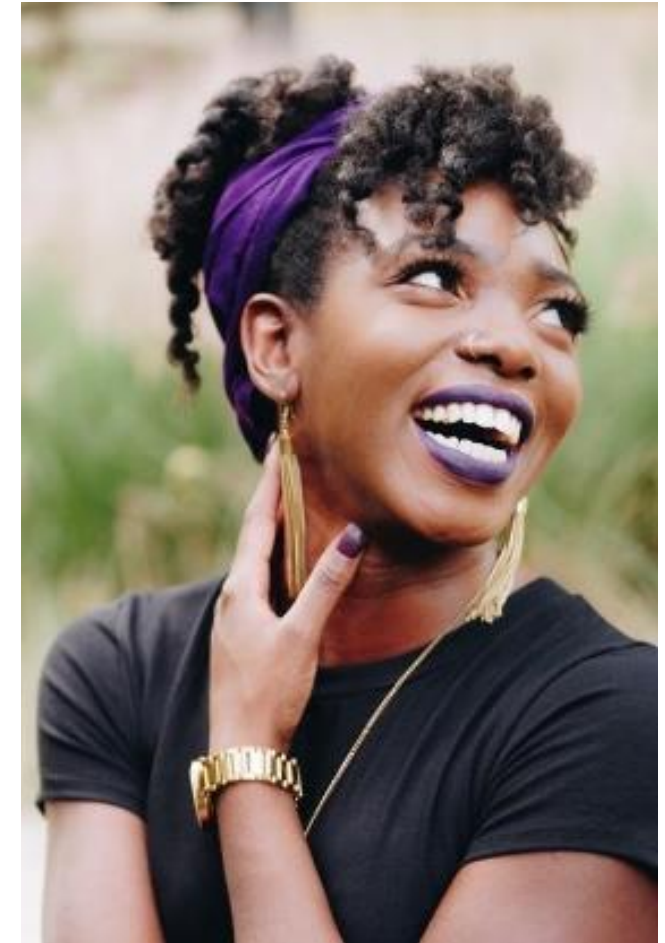
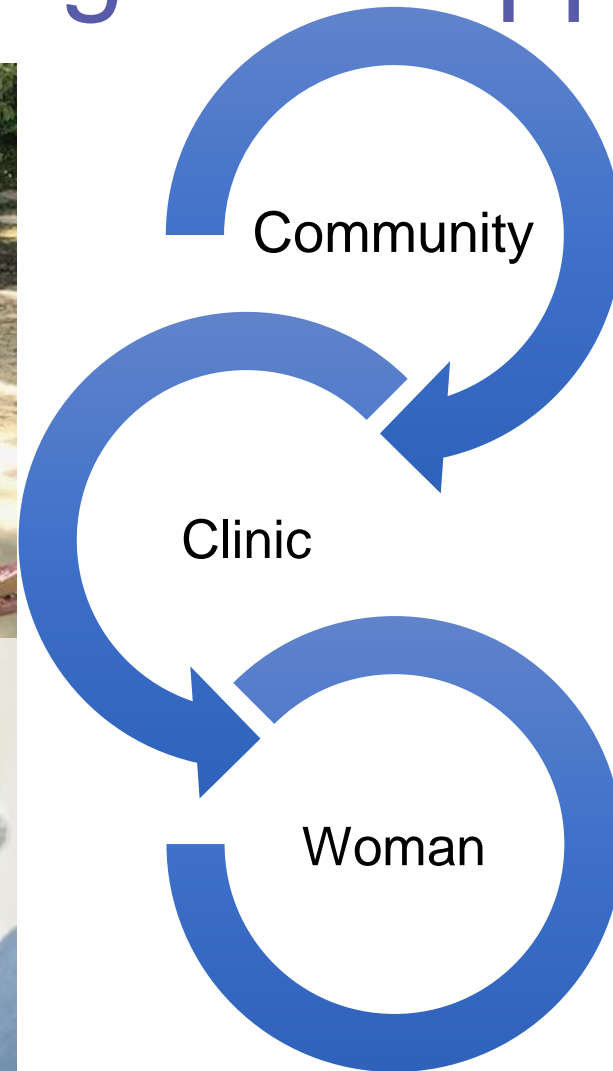
**NewMomHealth.com**

**The first national postpartum info  
source designed by moms for moms**



Zoom out

# Moms Need a Village of Support





# Build Community Support and Social Capital

- Family friendly places for new parents to connect and get resources
- Parks & Recs and libraries offer activities and services for new parents
- Breastfeeding Friendly Communities
- Support Groups / Social Media Connections
- Assistance with grocery shopping & errands
- Home Visiting / Child Care Providers
  - Strategies to connect new moms with each other
  - Assistance in getting needed health services
  - Problem solving around sleep, work and balancing family needs
  - Access to tips on things like Earned Income Tax Credits



# Policy Matters

- Prenatal and postpartum work accommodations and job protection
- Educational policies that create roadblocks for new parents
- Breast pumps provided before baby is born (via WIC)
- Paid family leave and paid sick leave
- Transportation – bus stops, infant / young child transit rules
- Housing and legal services
- Subsidized infant and child care
- Access to diapers and feminine products
- Access to respite care for high need situations



# Systems of Support Matter

New mothers have to operate across a variety of systems that do not have her needs at the center. Communities should consider convening these systems along with new moms and dads to identify other policy issues.

- WIC
- Child Care
- Pediatricians
- Employers
- Insurance Companies
- Home Visiting Programs / Parenting Programs
- Community Resources (Food Pantries / Diaper Banks)
- Women's Health Care (may shift or be unavailable)
- Social Services, including TANF and child welfare
- Behavioral Health Services (including dyadic substance use treatment)
- Transportation
- What else?



## Championing New Motherhood

### Mending A Broken System

Moms say they forgo needed care because...

- My baby's health is most important
- I thought maternity care was done
- I'm always so tired
- I'm feeling too blue to go
- I'm busy caring for a new baby
- I didn't have a ride
- I need better care

**Solution: Integrated services and seamless care transitions from preconception through postpartum and well-baby**

Moms say they forgo needed care because...

- I don't have child care
- I'm sure I'm the only one who feels this way
- I don't have coverage
- I feel like I'm all alone
- All my helpers left after the first few weeks
- I can't take time off from work

**Solution: Business, community, and government support, including paid parental leave, health insurance, and spaces for new parents to meet each other**

Moms say they forgo needed care because...

- I couldn't reschedule
- It's not worth the hassle
- I don't want to see that doctor again
- I feel fine (now)
- They don't speak my language
- I need more than one visit
- I'm afraid they won't think I'm a good mom
- I wasn't ready for the changes to my body
- I'm not happy with the care my doctor gave me

**Solution: Mother-centered care, including quality visits on her schedule with complete and culturally appropriate information**

UNC Center for Maternal & Infant Health

AMCHP



# 4<sup>th</sup> Trimester Matters on the Path to Kindergarten Readiness


- Secure parent-infant attachment, family trust, positive communication, and appropriate response to cues are foundational building blocks for growth and language development.
- Human infants are born full term with only 25% of their brain volume and continue their fetal trajectory of brain growth over the first postpartum year. This is a critical period, driven largely by social interaction with caregivers.
- Postpartum is a very sensitive period of development for a family. This is a complex time of physical recovery and healing, self-identity formation, and care for self, baby, family, and relationships.
- There are strong links between a mother's health and well-being and her capacity to connect and engage with her infant.
- There is increasing evidence that demonstrates the role that male caregivers have in their children's language development. The period of time around birth and the early months can set a relationship trajectory for the father/partner with the mother, the baby, and other family members.





- ✓ The 4<sup>th</sup> Trimester is a critical **transition** period.
- ✓ Postpartum healthcare, education, and services should be **tailored** to women's experiences, preferences, and constraints.
- ✓ Communication should be **compassionate and culturally-sensitive**.
- ✓ Care should be taken to examine **biases** to build trust and mutual respect.
- ✓ Systems mapping and building local commitment to identifying “p” and “P” policy issues is essential.



A woman with dark hair and glasses is smiling while holding two young children. The child on the left is a toddler with curly hair, and the child on the right is a baby. They are in front of a wall with a mural that includes the text 'WE ARE ALL ONE'.

**“The thing about reproduction is that, more than anything else, it tells you how a society values people.”**

Dorothy Roberts



# Q&A Section

*NCIT Capacity-Building Hub*

**Thank You for joining the webinar!**  
**Have feedback and next steps? Be sure to share**  
**in the post-webinar survey link below.**

## **Presenter Contact Information:**

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To access the survey, click [here](#).

