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People of Color Less Likely to be Screened for Perinatal Mood and Anxiety Disorders

*With mental health challenges a leading cause of maternal death,
grave disparities and gaps in care cannot be ignored.*

A new analysis involving 2,700 pregnant and postpartum women and people across the U.S. reveals a disproportionate lack of mental health screenings for Latina, Indigenous, and Black mothers and birthing people. The study, *Perinatal Mood and Anxiety Disorder and Reproductive Justice: Examining Unmet Needs for Mental Health and Social Services in a National Cohort*, was published today in the Journal Health Equity. ([find the article here](#))

Perinatal mood and anxiety disorders are the most common complications experienced during pregnancy, and the most underdiagnosed. According to the [CDC](#), mental health conditions are a leading cause of pregnancy-related death. The repercussions of failing to screen pregnant women and people for mood and anxiety disorders can significantly and adversely affect the health of parent and child. Pregnant women and people of color live with heightened awareness of the extreme disparities in [maternal mortality](#).

“For many families, pregnancy and postpartum care are a gateway to lifelong health,” says lead author Dr. Tanya Taiwo, University of British Columbia (UBC) Faculty of Medicine, Birth Place Lab collaborator, and Bastyr University Department of Midwifery assistant professor. “Perinatal care providers play a pivotal role in supporting the psychosocial health of the expectant parent and child through the perinatal experience. By screening and, when indicated, connecting pregnant and postpartum women and people to mental health counseling, perinatal care providers can save lives, enhance health, and set families up for lasting wellness.”

Perinatal mood and anxiety disorders increase health risks for mothers and birthing people and their children. Mood disorders such as depression can result in neurodevelopmental delays, behavioral problems, attachment disorders, and more. Anxiety in pregnancy is associated with premature birth and adverse implications for fetal neurodevelopment.

More than half of survey respondents reported structural barriers to optimal health during pregnancy. Additional findings from the study include:

- Latina women are least likely to be screened for postpartum mood and anxiety disorders.
- Indigenous women are three times more likely than white women to have unmet needs for perinatal treatment for depression or access to mental health counseling.
- Black women are more than twice as likely as white women to have unmet needs for perinatal treatment for depression or mental health counseling.
- Women and pregnant people with midwife care providers were significantly more likely to report screening for perinatal mood and anxiety disorders than those with physician care providers.

“Making reforms to our health care system can be accomplished and the findings of this study offer an attainable way forward that requires awareness from health care providers, regular screenings for perinatal patients with better attention for people of color, and lowering the bar of access to care to help babies — some of the most vulnerable members of our society,” says Taiwo. “In fact, perinatal care providers can play a pivotal role in supporting physical and psychosocial wellness throughout the childbearing cycle. Yet our research found significant unmet needs for psychosocial support services, with glaring disparities in care for Native American and Black women and childbearing people. Our findings call for a reproductive justice approach to effective health care reform.”

Study findings suggest a low-barrier approach from health care systems to screen pregnant people of color more effectively for perinatal anxiety and mood disorders:

- Increase incentives for adherence to national screening guidelines.
- Reimburse for perinatal mental health screening and treatment programs.
- Hire more community mental health workers.
- Expand culture-centered midwife-led birth centers.
- Increasing access to community mental health workers.

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About the Survey and Analysis

The Giving Voice to Mothers Study (GVtM) (n = 2700) was published in the journal *Reproductive Health* in 2019. Led by a multi-stakeholder Steering Council, the study captured participants' experiences of engaging with perinatal services, including access, respectful care, and health systems responsiveness across the United States. A patient-designed survey included variables to assess relationships between race, care provider type (midwife or doctor), and needs for psychosocial health services. In the current analysis, Khmet et. al calculated summary statistics and tested for significant differences in screening and care provision for psychosocial health across racialized groups, subsequently reporting odds ratios for each group.

About the Author

Tanya Khemet Taiwo, PhD, MPH, CPM, is a research fellow at the Birth Place Lab at the University of British Columbia in Vancouver BC, Canada, and an assistant professor in the Department of Midwifery at Bastyr University in Kenmore, WA. An epidemiologist, Dr. Taiwo's research examines the role of environmental exposures and maternal prenatal stress on child neurodevelopment.

About the Journal

Health Equity is a leading peer-reviewed open access journal that meets the urgent need for authoritative information about health disparities and health equity among vulnerable populations.

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