



MATERNAL DEPRESSION & INFANT MENTAL HEALTH

Current Situation

There is a need to build capacity in Florida to identify and address parental depression, as well as provide mental health services to families with young children who have been impacted by trauma and other adverse experiences. Depression, particularly in mothers, has a direct and measureable impact on the health and well-being of women and their families, and, if untreated, contributes to long-term health, education and societal costs.

Background

More than half of mothers in the state report experiencing postpartum depression after childbirth. The prevalence of depression is higher among mothers who are younger or older, black, low-income, single, with Medicaid or an unintended pregnancy. Less than 10 percent of mothers who experienced postpartum depression sought professional help. Depression also affects 10-14 percent of fathers. Parental depression and family factors that contribute to it—intimate partner violence, trauma, stress, poor birth outcomes and infant mortality —compromise the nurturing relationships that are key to healthy child development.

Proposed Changes

1. Allocate state mental health, Medicaid funding to build capacity to identify and address parental depression in programs that currently serve vulnerable families. Support universal screening of pregnant and postpartum women for depression.
2. Leverage federal and state funding (Project LAUNCH, MIECHV) to develop a comprehensive, cross-sector strategy for infusing infant mental health services in home visiting, child care and other early childhood programs serving vulnerable families.
3. Invest in education and training to ensure a qualified infant mental health work force is available to meet the state's needs.

Impact

Approximately 24,000 at-risk pregnant woman and their families identified annually through prenatal screening will have access to depression screening and evidence-based interventions through Healthy Start, infant mental health professionals and other community mental health providers.

Nurturing and attachment will be strengthened contributing to positive developmental trajectories in children, and preventing social, emotional, and behavioral problems through childhood and into adulthood.

Substantial national health care expenditures (\$1.89 billion) and indirect labor productivity costs (\$523 million) are associated with depression in young, high-risk mothers. These costs are disproportionately borne by the public sector and taxpayers in the form of Medicaid, welfare, and special education expenses.