

Entering, or remaining in a psychotherapeutic relationship is an important first step for postpartum or pregnant individuals coping with a perinatal mood and anxiety disorder. Therapy alone may meet the needs of some; others need additional treatment like psychiatric medication. Just as patients are encouraged to ask for help, a psychotherapist may need to reach out to others, to get their clients what they need.

There is a shortage of psychiatrists in Georgia. There is a paucity of perinatal psychiatrists. PEACE for Moms can help your patient by consulting with their obstetric or primary care clinician. We just need YOU to connect that provider with us.

To determine if your patient requires additional intervention, PEACE for Moms recommends that you administer either the Edinburgh Postpartum Depression Scale (EPDS) or the PHQ-9 (Patient Health Questionnaire) to your patient during visits at regular intervals, and whenever you feel more information is required.

Interpreting Screening Tools		
	PHQ-9	EPDS
Not Depressed	<5	<8
Mild Depression	5-9	9-13
Moderate Depression	10-14	14-18
Severe Depression	>16	>19
Self-Harm/Suicide Screening	Question #9	Question #10

*For all parents with a positive screen, first determine risk. Patients with SEVERE depression will benefit from additional screening and evaluation, and possible treatment. Any patient who screens positively for the suicide question should be further evaluated.*

1. If there is a crisis or safety concern or the parent gave a positive response on the EPDS or PHQ-9 self-harm question, refer to the parent’s local mental health emergency service or emergency room. The parent should not be left alone; older children should NOT be given the responsibility of sitting with the depressed parent. Ideally someone should accompany the parent(s) to emergency services.

2. If the parent is not in need of emergency evaluation and has a psychiatrist or psychiatric provider (or someone they have used in the past), refer the patient to that individual. With

parent's consent, notify that mental health provider of the results of the depression screening test.

3. If the parent is not in need of emergency evaluation but the parent does not already have a psychiatrist or psychiatric provider

- a. Refer them to a community mental health provider and give the parent information about community resources such as support groups.
- b. With the consent of the patient, and using the attached letter, urge the patient's obstetric or primary care physician or provider to reach out to PEACE for Moms <http://www.peace4momsga.org>, or 470-977-3223. PEACE for Moms recommends will help them further evaluate the patient and develop a treatment plan. Only a few details need be entered before the letter can be sent via fax, mail, or email. You may also wish to send a copy of the screening test with the letter.
- c. If the patient requires additional resources (especially those impacting social determinants of health) the patient should be referred to the Healthy Mothers Healthy Babies resource portal <https://www.resourcehouse.com/hmhb/>

4. Encourage your patient to reach out to the obstetric or primary care physician or provider. If you are concerned about the parent keeping the referral, consider calling in a week to verify that the parent followed through. If your practice has a care coordinator, follow up should be a routine part of your practice workflow.

5. Remember that you can always call PEACE for Moms if you have questions