



**Mental and Physical Support (Maps) For Moms:
Perceptions of Maternal/Infant Service Providers**

The prenatal/postpartum period represents a critical time for fostering mothers and infants’ health and well-being. Supporting a mother during this period offers a great opportunity to encourage mothers to establish healthy behaviors for both mother and child. Organizations have key opportunities when mothers access their services to provide support and education regarding healthy behaviors such as mental health. However, little is known regarding what Omaha area providers feel is being done to effectively support mothers and what areas need improvement. Thus, a survey was conducted evaluating maternal/infant service providers’ perceptions of the needs of women within the Omaha area.

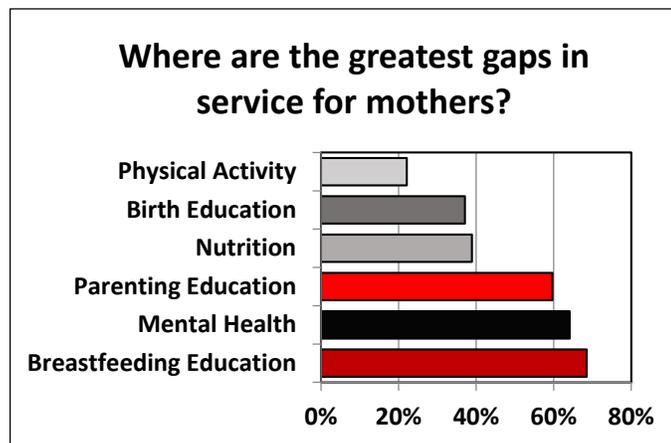
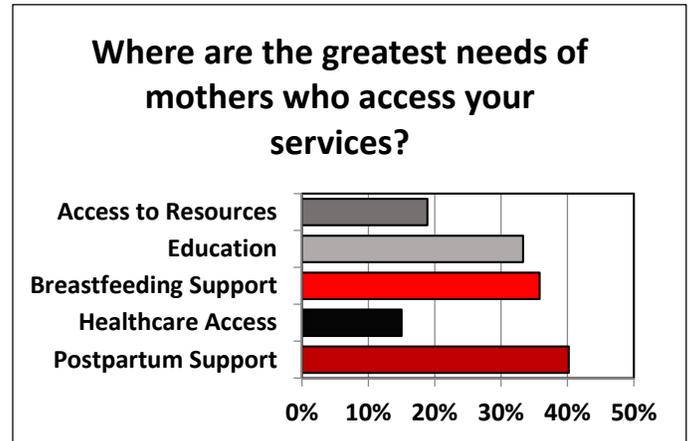
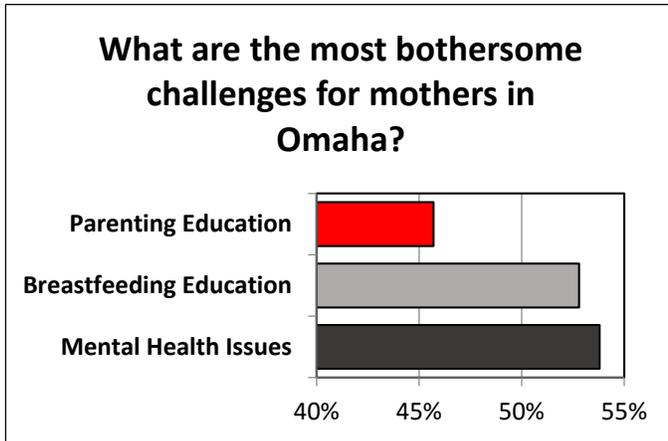
A total of 159 maternal/infant service providers in the Omaha metro completed the survey from May 2016-August 2016. Of these providers 37.3% provided breastfeeding/lactation support (e.g., lactation consultant), 27.0% provided direct healthcare (e.g., doctor, nurse) and 22.7% worked for a non-profit or government program.

Providers were first asked to evaluate their organization’s current and future ability to support mothers’ mental health. Each respondent was asked to rate how well their organization supports the mental health needs of mothers with a rating scale of strongly disagree, disagree, agree, or strongly agree. Overall, the majority of organizations (87.1%) either agreed or strongly agreed that their organization supported mothers’ mental health; however, a majority of respondents (73.9%) also agreed that their organization could use help planning ways to address mental health. The majority of providers disagreed or strongly disagreed (77.6%) that their organization had everything they needed to provide mental health programs. Further findings can be seen below.

Mental Health Support (%)	Strongly Disagree/Disagree	Strongly Agree/Agree
My organization supports pre/postnatal mothers and their mental health	12.9	87.1
Leaders of my organization dedicate the appropriate amount of time to addressing pre/postnatal mental health	24.5	75.5
My organization should not be active in addressing pre/postnatal mental health	88.9	11.1
My organization needs information about pre/postnatal mental health	21.9	78.1
My organization needs financial resources to address pre/postnatal mental health	30.4	69.6
My organization needs help planning ways to address pre/postnatal mental health	26.1	73.9
My organization needs outside experts (mental health professionals) to address pre/postnatal mental health	28.7	71.3
My organization has everything it needs to do effective pre/postnatal mental health programs	77.6	22.4
My organization is ready to address pre/postnatal mental health	40.3	59.7

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Providers were also asked what they believed were the most bothersome challenges and greatest needs of Omaha mothers as well as where the greatest gaps in service were. Key findings are listed below. In regards to the most bothersome challenges facing mothers', mental health issues was the most common challenge mentioned by providers (53.8%). Further, postpartum support was noted as the greatest need of mothers' accessing their organization's services (40.2%). When asked about the greatest gaps in service, breastfeeding education was noted most frequently (68.5%) followed by mental health services (64.1%).



In conclusion, the majority of providers felt their organization could adequately support mother's mental well-being but are in need of capacity support and the utilization of outside experts would be beneficial. Providers felt women needed more opportunities for postpartum and breastfeeding support and that mothers' most bothersome challenges were related to mental health issues. Future consideration should be given to developing opportunities to develop collaborative relationships in order to combine supportive services across Omaha organizations to maximize support opportunities. For example, lactation support groups could be utilized as an opportunity to provide mental health education. Further evaluation utilizing qualitative measures (e.g., interviews) could uncover further collaboration opportunities as well as provide deeper insight into provider perceptions.

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