

# North Carolina (NC) Maternal Mental Health MATTERS and NC Psychiatry Access Line: 2021 HRSA MCHB Evaluation Survey Findings

## BACKGROUND

The Health Resources and Services Administration (HRSA) Maternal and Child Health Bureau (MCHB) launched the Screening and Treatment for Maternal Depression and Related Behavioral Disorders (MDRBD) program to promote behavioral health integration in maternal health care by supporting the development and improvement of existing mental health care telehealth access programs. As part of the HRSA MCHB evaluation, surveys were administered in 2021 to health care providers (HCPs) enrolled in NC Maternal Mental Health MATTERS and the NC Psychiatry Access line (NC-PAL). Select findings from the HCP Survey for NC Maternal Mental Health MATTERS and NC-PAL are presented below.

### For this document:

- Missing and "N/A" responses not included
- N = Total number of survey respondents who reported data for a measure (e.g., Yes and No)
- n = Number of survey respondents who reported a specific response (e.g., Yes) within the measure

## HCP SURVEY: SELECT FINDINGS

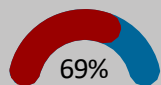
The HCP Survey was administered to 192 HCPs, and 67 responses were received (35% response rate).



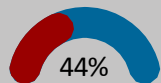
### PSYCHIATRIC CONSULTATION LINE

- HCPs most commonly contacted the MDRBD team in the last year for help with referrals (N=55, n=34; 62%).
- In the last year, HCPs "agreed" or "strongly agreed" their interaction with the MDRBD team informed assessment of pregnant and postpartum patients (N=50, n=40; 80%).
- Over 80% of HCPs "agreed" or "strongly agreed" (N=54, n=44; 81%) that they could readily obtain input from the MDRBD team.

### Common Patient Issues That Prompted HCPs to Contact the MDRBD Team\* (N=55)

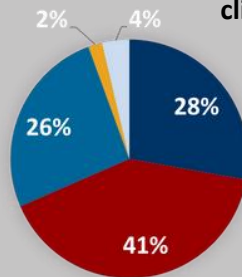


Behavioral Health Conditions (n=38)



High-Risk Pregnancy (n=24)

In the last year, as a result of the MDRBD program, more of my pregnant and postpartum patients received treatment (e.g., counseling, medication) for a behavioral health condition, either in my office or from a behavioral health clinician (N=54).



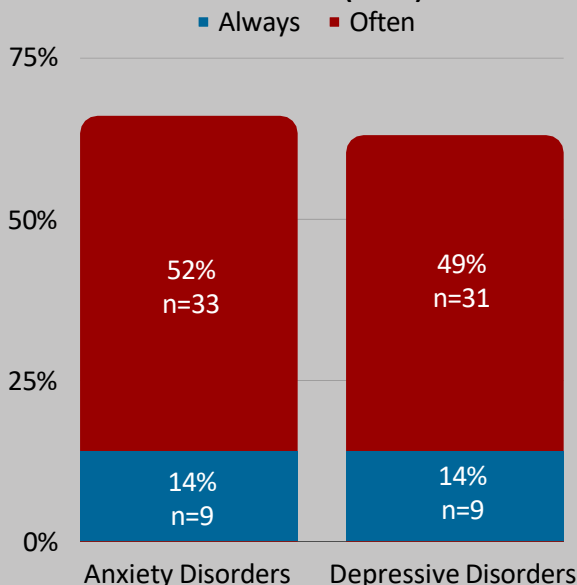
- Strongly Agree (n=15)
- Agree (n=22)
- Neither Agree nor Disagree (n=14)
- Disagree (n=1)
- Strongly Disagree (n=2)

## SCREENING AND TREATMENT

- Most HCPs "agreed" or "strongly agreed" (N=52, n=31; 60%) that they felt as comfortable assessing and treating pregnant and postpartum patients with common behavioral health conditions as they were assessing and treating them for common medical conditions.



### Conditions "Always" or "Often" Managed by HCPs in the Last Year\* (N=63)



## OPEN-ENDED FEEDBACK

The following themes emerged from select open-ended questions from the HCP Survey:

- Overall, pregnant and postpartum patients benefited from HCP participation in the MDRBD program by receiving:
  - Improved access and quality of behavioral health care
  - Improved access to community resources
- Currently, HCPs still need the following assistance to improve the behavioral health of their pregnant and postpartum patients:
  - Identification of providers who are accepting new patients, speak Spanish, accept Medicaid, and provide services for uninsured patients
  - More resources for community referrals, counseling services, psychotherapy, and psychiatric care
- Clinical practices HCPs have adopted as a result of participation in the MDRBD program include:
  - Increased patient connection to behavioral health services
  - Increased initiation of pharmacotherapy

\*Percentages do not add up to 100%, as respondents could select more than 1 response.