COLLABORATIVE CARE FOR HIGH-RISK MOTHERS

Untreated Mental Health Problems have serious consequences for mothers and their children. A recent report from the National Scientific Council on the Developing Child and the National Forum on Early Childhood Program Evaluation summarizes evidence on the harmful effects of maternal depression on families and children.*

Babies of depressed mothers are exposed to high levels of stress hormones in utero, which can adversely affect fetal growth and brain development. Such babies are also at an increased risk for developing depression or other mental disorders in childhood and adolescence. Despite these serious consequences, fewer than one in four depressed mothers receive effective treatment.

UW Medicine is planning to address this problem by creating the **Center of Excellence** in **Depression Care for High-risk Mothers.** We hope to build on a decade of research on collaborative care for depression, initially serving high-risk mothers in King County and ultimately developing resources that can help improve the care of depressed mothers and their children worldwide. We hope you will join us in this critically important work by making a gift.

Background

Depression occurs in 5–10 percent of mothers in the general population, but rates are as high as 25 percent in women who are poor or have limited social support. Mothers who are depressed after the birth of a child often find it difficult to care for and establish nurturing relationships with their children during a crucial time of development. These factors may explain why children raised by a severely depressed mother tend to perform lower on cognitive, emotional and behavioral assessments, and are at higher risk for experiencing social adjustment difficulties and problems at school.

We can reduce the risk of such developmental problems by making it easier for depressed mothers to get effective depression treatment. Our solution is to use the collaborative-care model — a patient-friendly approach that improves access to depression treatment in primary care and other settings where most women receive their care.

In a collaborative-care environment, mental health professionals, such as clinical social workers, nurses or psychologists, work closely with a patient's primary-care provider and a psychiatric consultant to provide effective treatment. Developed by researchers at the University of Washington, collaborative care has been proven effective in more than 70 research studies across diverse settings and populations.

 $^{*\} http://developingchild.harvard.edu/index.php/resources/reports_and_working_papers/working_papers/wp8$

Researchers and clinicians in our department are well positioned to improve clinical outcomes for depressed mothers and their children through the creation of the center. For the past 10 years, we have tracked a cohort of mothers served at our Maternal and Infant Care Center at UW Medical Center. We have also partnered with Public Health of Seattle and King County in an innovative program to provide depression treatment for high-risk mothers in 14 community health clinics. Since its inception in 2009, this program has provided collaborative care to more than 2,500 high-risk mothers in King County.

The new Center of Excellence in Depression Care for High-risk Mothers will be based in our Department of Psychiatry & Behavioral Sciences and will focus on three initiatives:

1) research and program development in maternal depression care, 2) the establishment of a collaborative-care program for high-risk mothers served at UWMC, and 3) the creation of endowed faculty positions.

We have the experience to significantly improve care for depressed mothers and their children with the creation of the center — and with your help — we can take our work to the next level.

Opportunities for Partnership

To establish the Center of Excellence in Depression Care for High-risk Mothers, we seek philanthropic support in three key areas, explained briefly below.

I. Research and Program Development

We stand to gain valuable knowledge and insight about caring for depressed mothers by analyzing data from the 2,500 mothers served in our current program in partnership with Public Health of Seattle and King County. Information gained from these analyses will help identify mothers who will derive the most benefit from our services and suggest ways to improve care for depressed mothers. Such preliminary research will also help position our center for more comprehensive research funding from national sources such as major foundations or the federal government. Initial research aims will include:

- analyzing existing data on over 2,500 mothers served in the program to date;
- identifying best practices among the participating clinics and clinicians;
- conducting focus groups with patients and clinicians to identify opportunities for improvement;
- convening a group of experts to inform the development of a manual for an improved collaborative care model; and
- pilot-testing an adapted intervention strategy with a small number of patients to gain data for a larger research study, one we hope will be funded by the federal government.

II. Creation of a Collaborative-care Program for High-risk Mothers Served at UW Medical Center

We propose to implement a state-of-the-art collaborative care program to serve high-risk mothers at the Maternal Infant Care Clinic and the Women's Health Center at UW Medical Center. We anticipate that implementing such a program could provide effective depression care to approximately 250 high-risk mothers each year.

Many of the costs associated with establishing a collaborative-care program can be covered by billing patients' health insurance, but some activities — essential to the program's success — are not reimbursed. This includes time spent coordinating care, contacting outside providers and referral agencies, conducting psychiatric case reviews, making medication management and other treatment recommendations for primary-care providers, and providing long-term follow-up of mothers and their children.

Accordingly, to establish this program, we are seeking salary support for:

- a full-time depression care manager at UWMC;
- a part-time psychiatric consultant dedicated to the program; and
- a part-time program assistant who will maintain a registry to track maternal and child outcomes for ongoing quality improvement.

III. Creation of Endowed Faculty Positions in Maternal and Child Mental Health

One of our long-term goals is to create an endowed professorship and /or chair for the center. Endowed chairs and professorships are prestigious, honorary positions, established by contributors, that provide important resources for faculty members' work. These positions serve as powerful tools that will allow UW Medicine to recruit and retain excellent faculty for the center in the future.

Establishing an endowed chair or professorship is one of the greatest honors that an institute can bestow upon a faculty member — providing a significant legacy to promote future achievements in research, patient care and education. We intend to search for endowed funds to support recruitment of a faculty member who will:

- help develop and lead our center of excellence;
- supervise the clinical and research activities of the collaborative-care program;
- inspire and train the next generation of physicians and mental-health specialists to serve depressed mothers and their children; and
- become a local, regional and national resource to help improve care for this high-risk population.

The Budget

The budget below lists the center's current needs and opportunities for investment.

Components	Investment
I. Research and Program Development	
Analysis of data from 2,500 mothers served to date in the King County High-risk Moms Program	
Focus groups with key informants to identify best practices	\$25,000
Expert review and development of an adapted care program for depressed mothers	\$25,000
Total Costs	\$50,000
II. Creation of Collaborative-care Program for Depressed Mothers at UWMC	
Recruitment and salaries of essential staff	\$100,000 in year one* \$50,000/year for subsequent years.

^{*} Program costs in year one are expected to be higher because of expenses related to training and start-up, and also because it will take time to maximize insurance billing for covered program components.

Your Gifts Can Make a Difference

Investing in the Center of Excellence in Depression Care for High-risk Mothers will help us significantly improve quality of life for this critical population and improve the lives of their children. Your financial support will make a tremendous difference in our ability to reach and support women and children, not only in the Pacific Northwest but eventually around the world.

We welcome the opportunity to further explore the area(s) of this proposal that are of greatest interest to you. For more information, please contact David Chow, MNPL, director for philanthropy, at 206.543.3527 or chowd@uw.edu.