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MATERNAL MENTAL HEALTH

An invisible epidemic

Confronting the challenges of maternal mental health (MMH) by exploring integrated solutions that prioritize outcomes.

A Pacify and Seven Starling
report on the crisis in
maternal mental health

2025



EXECUTIVE SUMMARY

Maternal Mental Health by the Numbers

The data paints a stark picture of maternal mental health in America:

The crisis in maternal health is not limited to physical conditions and medical complications during labor and delivery. Mental health issues, including anxiety and depression, substance use disorders, and suicide are a leading cause of pregnancy related deaths, and people of color are at an increased risk. Addressing our maternal mortality crisis requires an integrated, multi-pronged approach using evidence-based support during this vulnerable stage of life. Pacify and Seven Starling's partnership explores how this approach can have a positive impact on maternal outcomes.

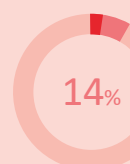
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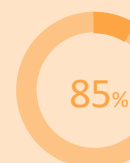
1 in 5 women
experience clinical
postpartum depression



Between 5% and 14% of
pregnant individuals have
thoughts of self-harm



As many as 85% of patients
with certain MMH conditions
are believed to go untreated



Overview of MMH Conditions

Pregnancy-related mental health issues can arise or be exacerbated at different stages of the maternity journey – from prenatal to postpartum. One or multiple of these conditions may occur concurrently and may range from mild to severe:

Anxiety	Substance Use Disorders
Depression	Bipolar Disorder
Stress Disorders, including PTSD	Psychosis
Panic Disorders	Self-Harm
Obsessive Compulsive Disorders	Suicide

<https://womenshealth.gov/nwhw/day-3-shining-a-light-on-maternal-mental-health>
<https://postpartum.net/>

<https://www.sevenstarling.com/what-we-treat>
<https://pubmed.ncbi.nlm.nih.gov/15883651/>

Basile-Ibrahim B, Combellick J, Mead TL, Sorensen A, Batten J, Schafer R. The Social Context of Pregnancy, Respectful Maternity Care, Biomarkers of Weathering, and Postpartum Mental Health Inequities: A Scoping Review. Int J Environ Res Public Health. 2024 Apr 15;21(4):480. doi: 10.3390/ijerph21040480. PMID: 38673391; PMCID: PMC11049830. <https://pubmed.ncbi.nlm.nih.gov/38673391/>



A Variety of Factors Increase the Risks

Having a history of mental health issues prior to pregnancy significantly increases the risk of maternal mental health issues. Several health conditions and life events also increase the risk for MMH disorders including:

Gestational diabetes or chronic illness

Lack of spousal and social support

Complications during pregnancy

Race and low socioeconomic status

Stressful life events or domestic abuse

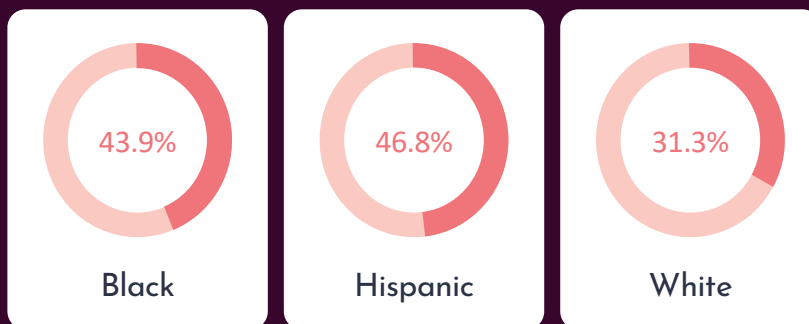
Prior pregnancy loss



Race Alone Presents a 2-4x Higher Risk

Racial disparities in maternal health conditions and outcomes extend to mental health. Black women experience maternal mental health issues at rates two to four times higher than their white counterparts and are less likely to receive adequate mental health care.

Breakdown of PPD in the U.S.:



Disparities Are Especially High for Postpartum Depression (PPD)

13% of all mothers in the U.S. are at risk. But Black and Latin women are more likely to experience symptoms.

Major Care Gaps Exist for Prenatal And Perinatal Anxiety

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Pregnancy is a uniquely complex time, with intertwined physical and emotional factors at play. Many individuals experience at least some anxiety during pregnancy, which is entirely normal.

However, some pregnant people experience extreme anxiety, affecting quality of life and overall wellbeing. Evidence based services like talk therapy, peer support, and specialized exercises are evidence-based solutions that can help. But dismissing or normalizing symptoms and not knowing when or how to seek help can be a barrier. This leaves a care gap that affects ~85% of expectant parents.

Early education, awareness, and intervention is essential. Doulas often provide emotional support and can encourage expectant parents when the anxiety has become debilitating, providing resources and guidance on how to access care.

20%

more than 20% of women experience **anxiety or depression** during the perinatal period

15%

fewer than 15% receive the **mental health care** they need

Leaving a care gap of
~85%

Know When it's Time for Help:

- ✓ Anxiety or fear that interrupts thoughts and interferes with daily tasks
- ✓ Panic attacks - outbursts of extreme fear and panic that feel overwhelming and uncontrollable
- ✓ Persistent worries that keep coming to mind, affecting one's ability to focus
- ✓ Constant feelings of irritability, restlessness or "on edge"
- ✓ Having tense muscles, a "tight" chest and heart palpitations
- ✓ Finding it difficult to relax and/or taking a long time to fall asleep at night, causing daily fatigue
- ✓ Anxiety or fear that prevents a person from engaging in social outings or activities they otherwise enjoy

Ignoring Pregnancy Related Stress Has Real Consequences

High levels of stress are associated with increased risk for complications, including miscarriage, preeclampsia, and depression. These realities make it imperative to get stress under control before it has further consequences.

Many people manage stress by getting more sleep, making improvements in their diet, exercising more, or learning breathing exercises. But for some, lifestyle changes may not be enough. Connecting with a therapist who is skilled in pregnancy-related stress, and sensitive to the unique needs of a pregnant person can be extremely effective.

Finding specially trained therapists who understand the unique pregnancy and postpartum needs are critical. Doulas can often guide patients to the right resources and support services.

Combining doula-led support with specially trained maternal mental health providers ensures that pregnancies are supported in a more comprehensive manner.

Goldstein E, Keita M, Koomson C, Tintle N, Adlam K, Farah E, Koenig MD. A Pilot Randomized Controlled Trial of a Multimodal Wellness Intervention for Perinatal Mental Health. *J Midwifery Womens Health*. 2025 Apr 10. doi: 10.1111/jmwh.13754. Epub ahead of print. PMID: 40207735. <https://onlinelibrary.wiley.com/doi/10.1111/jmwh.13754>
Brown HL. Reconsidering the Impact of Race on Maternal Mental Health. *Obstet Gynecol Clin North Am*. 2025 Mar;52(1):43-50. doi: 10.1016/j.ogc.2024.09.003. Epub 2024 Dec 20. PMID: 39880565. <https://pubmed.ncbi.nlm.nih.gov/39880565/>
<https://policycentermmh.org/maternal-suicide-issue-brief/>

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The Hard Truth About Maternal Suicide and Overdose-Related Deaths

Sadly, suicides and overdoses account for a large majority of postpartum deaths. And many of these deaths are related to untreated mental health issues.

The anxiety and stress of pregnancy may be continued or compounded in the postpartum period, in addition to parenting demands, or physical challenges that may begin after delivery. For some, birth itself can be triggering or cause PTSD.

Recognizing warning signs, risk factors and intervening early with evidence-based support is critical.

20%

Research shows that ~20% of maternal deaths are due to suicide.

“BABY BLUES” or Something More Serious?

Many new parents experience a mild mood disorder known as “baby blues” shortly after childbirth. This is normal, given the hormonal fluctuations, physical recovery, sleep deprivation, and the emotions of adjusting to new roles. Baby blues usually don’t require medical help, and often resolve within weeks, but struggling parents benefit from added support to guide them through this incredible, life-changing, and physically demanding period.

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**4 OUT OF 5 NEW
MOTHERS EXPERIENCE
“BABY BLUES”**

Recognizing When it's More Than “Baby Blues”

Childbirth-related PTSD

A traumatic childbirth experience is associated with symptoms of post-traumatic stress disorder. Emergency cesarean sections and life-threatening complications can be traumatizing, but so can the experience of being treated disrespectfully, feeling violated by medical staff, or losing control of decision-making.

Black women and other women of color report higher rates of feeling mistreated during childbirth and higher rates of post-traumatic stress postpartum.

Self-harm and Suicide

Self-harm and suicidal ideation are additional risks of prenatal or postpartum depression.

Among those experiencing depression during or after pregnancy, suicide is the first or second cause of death.

Substance Use Disorders

Having an opioid use disorder greatly increases the risk of maternal death or life-threatening complications.

Postpartum Depression (PPD)

Postpartum depression is different from baby blues. Symptoms, which last more than two weeks after the birth, may include:

- ✓ Feeling sad or anxious, or an “empty” mood
- ✓ Feeling hopeless
- ✓ Irritability, frustration, or restlessness
- ✓ Feeling guilty, worthless, or helpless
- ✓ Feeling tired all the time
- ✓ Being restless or having trouble sitting still
- ✓ Sleep problems
- ✓ Changes in appetite
- ✓ Lack of emotional attachment with the baby
- ✓ Feeling unable to care for the baby
- ✓ Loss of interest in previously enjoyable activities
- ✓ Thoughts of death or harming oneself or the baby
- ✓ Difficulty concentrating, remembering, or making decision

Early Detection and Support Can Address Preventable Deaths

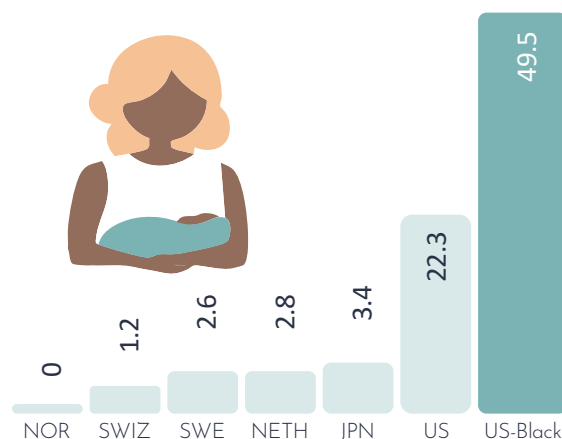
About a third of maternal deaths in the U.S. occur in the six weeks after childbirth.

Another 30% occur between six weeks and 12 months after delivery. Compared with other developed nations, the United States health care system offers fewer services (such as supportive home visits) during the postpartum period.

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Maternal deaths
per 100,000 live births



Leveraging Doulas to Overcome Common Barriers to Care

Research has identified three common levels of the healthcare system that present barriers to mental health services:

- 1 Failure to recognize symptom severity;** due to patient masking, lack of appropriate assessment tools, or competing demands on clinical resources.
- 2 Failure to communicate risk;** which could be due to a language barrier, fragmentation of care, or poor referral pathways.
- 3 Failure to access care;** due to lack of available providers, patient reluctance, or inability to find or match with a covered therapist.



Doulas are uniquely positioned to detect early signs of emotional and mental health issues and help them find and access mental health care. As part of a comprehensive, and proactive care team, Doulas can connect pregnant or postpartum individuals with the right resources for screening and follow-up care, and ensure women are prepared to recognize the signs and symptoms of postpartum depression before it becomes a crisis.

The Unique Value of Doula Care for Early Intervention

Doulas provide unparalleled continuity of care that traditional healthcare cannot match:

A comprehensive, wraparound support model enables doulas to:

- ✔ Detect early signs of emotional and mental health issues
- ✔ Provide continuous emotional support and advocacy
- ✔ Connect clients to appropriate mental health resources
- ✔ Reduce maternal stress, anxiety, and pain during childbirth
- ✔ Improve communication between patients and healthcare providers



<https://www.aamc.org/news/tall-maternal-mental-illness-america>
Byatt N, Levin LL, Ziedonis D, Moore Simas TA, Allison J. Enhancing Participation in Depression Care in Outpatient Perinatal Care Settings: A Systematic Review. *Obstet Gynecol.* 2015 Nov;126(5):1048-1058. doi: 10.1097/AOG.0000000000001067. PMID: 26444130; PMCID: PMC4618720. <https://pubmed.ncbi.nlm.nih.gov/26444130/>

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The Transformative Impact of Doula Care on Mental Health Outcomes

The evidence for doula care's impact on maternal mental health is compelling and consistent:

57%

Doulas have shown to **reduce postpartum depression** rates by 57.5%

64.7%

Doula care during labor and birth specifically reduced the odds of **postpartum depression** and anxiety by 64.7%

The Critical Role of *Specialized* Maternal Mental Health Providers

Professional Training and Certification

**Specialized maternal mental health providers
bring essential clinical expertise through:**

- ✓ Perinatal Mental Health Certification (PMH-C) programs
- ✓ Advanced training in perinatal mood and anxiety disorders
- ✓ Specialized knowledge of pregnancy-related trauma and PTSD
- ✓ Understanding of medication safety during pregnancy and breastfeeding
- ✓ Cultural competency training for diverse populations and experiences
- ✓ Understanding the unique needs and stressors during pregnancy and postpartum

Evidence-Based, Culturally Compassionate Treatment Approaches

**Specialized providers offer comprehensive
treatment options including:**

- ✓ Psychotherapy specifically adapted for perinatal populations
- ✓ Group therapy and support groups
- ✓ Couples therapy for relationship challenges during the perinatal period
- ✓ Medication management with safety considerations
- ✓ Mindfulness-based interventions and exercise programs

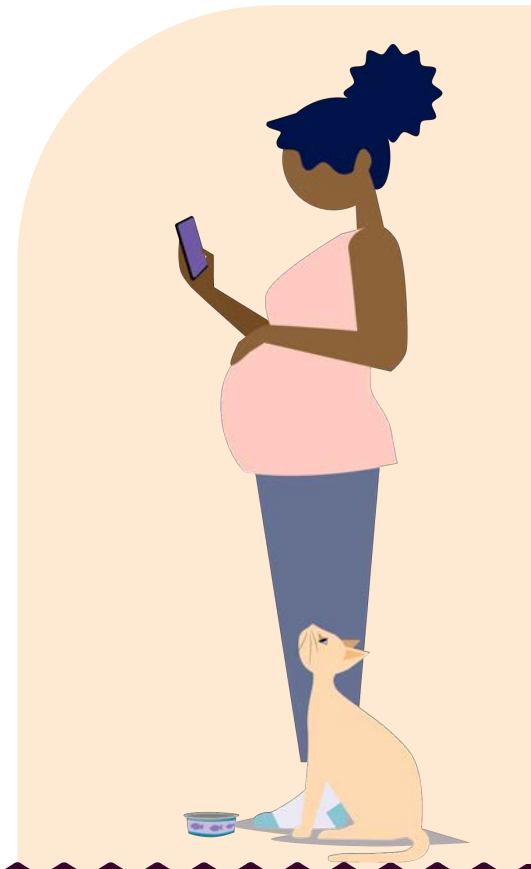


The Opportunity for Impact: Improving Maternal Mental Health Through Specialization *and* Integration

Integrating doula care and maternal mental health support throughout pregnancy and postpartum has a significant positive impact when used together. Clients who are matched with therapists or doulas of a common cultural background are less likely to drop out of therapy or treatment.

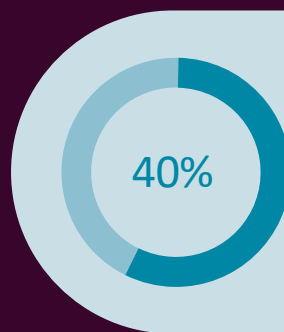
Evidence Shows Doula Care Has Positive Effects on Maternal Mental Health

Multiple studies have shown that having emotional, physical, and advocacy support from a doula has multiple positive effects on positive outcomes, including mental health after childbirth. Incorporating doulas from pregnancy through postpartum can have a tremendous impact on MMH outcomes, particularly when fully integrated into the care journey, and with other mental health support solutions.



Maternity Offers An Entry Point for Accessing Mental Health Care

Pregnancy often opens the door to healthcare access for individuals who typically don't get regular screenings. This is a unique opportunity to identify those who would benefit from mental health services.



of Seven Starling members are accessing mental health care for the very first time



Prenatal psychotherapy has been shown to reduce maternal depression and anxiety, improving quality of life

Making the Case for Value Based Care

A more complete and comprehensive approach to maternal health incorporates doula care as well as access to mental health services when needed. This integrated approach presents a compelling opportunity for payers to enhance patient outcomes, improve provider efficiency, and achieve cost savings.

By aligning with value-based care principles and prioritizing patient-centered support, insurance leaders can make significant strides in improving maternity outcomes for all. Integrated care contributes to better birth outcomes and reduces the need for expensive medical interventions, with a potential cost reduction that exceeds the modest cost of mental health care..

Furthermore, making these services more accessible by offering parents both in-person and virtual options ensures that all populations can access the support they need, and the experience they deserve.



THE EVIDENCE

Better Outcomes *and* Economics: Measuring the Impact of Integrated Maternal Health Solutions

The economic case for integrated doula and mental health care is compelling.

One Oregon research study measured outcomes and cost-savings related to integrating doula care into the maternal health journey.

Oregon saved \$91 million and prevented:

219,530

Fewer cesarean births

51

Fewer maternal deaths

382

Fewer uterine ruptures

100

Fewer hysterectomies

Other national studies have identified results pointing to the positive economic impact:

- Breastfeeding support from doulas reduces healthcare costs by \$3 billion annually
- Cost savings from reduced NICU admissions and shorter hospital stays

Doula Return on Investment

**An integrated multimodal model
delivers value through:**

- ✓ Prevention of expensive medical interventions
- ✓ Reduced readmissions and complications
- ✓ Improved medication adherence and treatment engagement
- ✓ Earlier intervention preventing crisis-level care needs
- ✓ Enhanced workforce productivity through better maternal mental health

\$91MM

Total cost savings and cost prevention
estimated by one Oregon health system

\$14B

Total estimated cost burden to the
U.S. due to untreated maternal
mental health conditions





SUMMARY OF BENEFITS

The Power Of Comprehensive Maternal Mental Health Support

Complementary, Combined Strengths

The combination of doula care and specialized mental health providers creates a comprehensive support system that addresses both the social determinants of health and clinical mental health needs:

Doulas provide:

- ✔ Continuous emotional and physical support
- ✔ Cultural competency and community connection
- ✔ Advocacy and navigation support
- ✔ Early identification of mental health concerns
- ✔ Guide to professional mental health services

Mental Health Specialists provide:

- ✔ Clinical assessment and diagnosis
- ✔ Evidence-based therapeutic interventions
- ✔ Medication management when appropriate
- ✔ Crisis intervention and safety planning
- ✔ Specialized trauma treatment



Building A Path Forward Is A National Imperative

The evidence overwhelmingly demonstrates that an integrated approach combining doula care with specially trained maternal mental health providers offers a transformative solution that can dramatically improve outcomes while reducing costs.

Scaling Integrated Care Solutions

To address the maternal mental health crisis at scale, the healthcare system must:

- 1 **Expand Medicaid Coverage:**
All states should cover doula services through Medicaid, which finances 45% of U.S. births
- 2 **Standardize Screening & Training:**
Implement consistent maternal mental health competencies and processes in staff training and education
- 3 **Create Payment Models:**
Develop sustainable reimbursement structures that support the integrated care model
- 4 **Build Workforce Capacity:**
Invest in training and certification programs for both doulas and perinatal mental health specialists
- 5 **Enhance Data Systems:**
Improve tracking and measurement of maternal mental health outcomes

Compelling Case for Action

The evidence is unequivocal: multimodal support through integrated doula care and specialized maternal mental health providers is essential for improving maternal health outcomes. This approach offers:

- ✓ Dramatic reductions in postpartum depression and anxiety
- ✓ Significant cost savings through prevention of expensive interventions
- ✓ Improved health equity by addressing disparities in care access and quality
- ✓ Enhanced patient satisfaction, clinical engagement and adherence
- ✓ Better outcomes for both mothers and infants



CONCLUSION

The Opportunity Is Here. The Time Is Now

More than 75% of pregnant individuals with mental health symptoms receive no treatment when no interventions are in place. This statistic alone demonstrates the urgent need for systemic change. The evidence presented throughout this analysis shows that when we combine the continuous, culturally competent support of doulas with the clinical expertise of specialized mental health providers, we can create a safety net that catches women before they fall into crisis.

The time for action is now

Every day of delay means more preventable maternal deaths, more families in crisis, and more missed opportunities to transform lives. By embracing the integrated model of doula care and specialized mental health support, we can finally begin to address this invisible epidemic and ensure that every woman receives the comprehensive care she deserves during one of the most vulnerable periods of her life.

The data is clear, and the solutions are proven

The moral imperative is undeniable. Improving maternal mental health requires a multi-modal and multidisciplinary approach – and the evidence shows that this approach works. It's time to scale these solutions nationwide and make quality maternal mental health care a reality for all women, regardless of their background, income, or zip code.

Questions for Seven Starling or Pacify team? Please
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