

Bree Perinatal Behavioral Health Workgroup
Adopted January 24th, 2024



Working together to improve health care quality, outcomes, and affordability in Washington State.

Perinatal Behavioral Health Appendix B Behavioral Health Support Services

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Pregnant people, their children and families may require supportive services to align person-centered pregnant person-dyad care with their social and physical needs, goals, values, capacities, and preferences. This section focuses primarily on support services related to behavioral health for pregnant and postpartum patients. These support services should be integrated into the birth plan and perinatal clinical care plan.

Perinatal Psychiatry Consultation Line (Perinatal PCL): The University of Washington Perinatal Psychiatry Consultation Line (Perinatal PCL) is a free telephone consultation service for health care providers caring for patients with mental health problems who are pregnant, postpartum, or planning pregnancy. Any health care provider in Washington State can receive consultations on, recommendations, and referrals to community resources from a UW psychiatrist with expertise in perinatal mental health.

Psychiatrists provide consultation on any mental behavioral health-related questions for patients who are pregnant, in the first year postpartum, who are planning pregnancy, or who have pregnancy-related complications (e.g. pregnancy loss, infertility). Topics may include depression, anxiety, other psychiatric disorders, or co-occurring substance use disorders; adjustment to pregnancy loss, complications, or difficult life events; risks of psychiatric medications; non medication treatments; and consulting about women on psychotropic medications who are wanting to or thinking about getting pregnant.

The phone line **877-725-4666 (PAL4MOM)**, is staffed weekdays from 9 AM to 5 PM. Providers can call at any time and receive a call back within one working day. Providers can also e-mail with any questions or set up a consultation at ppcl@uw.edu.

View their [Perinatal Mental Health Care Guide 2023](#) which provides general guidance and workflows for behavioral health and other concerns in the pregnant and postpartum period.

Perinatal Support Washington Warm Line: Perinatal Support Washington is a state-wide non-profit that aims to support efforts to address perinatal mental health. Their **warm line** is a toll-free telephone peer support line for parents in need.

Parents can call or text **1-888-404-7763** to speak to a parent who has experience with perinatal mood and/or anxiety disorders and can connect them with licensed therapists trained in perinatal mental health. Patient-facing flyers can be found [here](#)

They maintain a [directory](#) with various kinds of support for all over the state that helps parents find the kinds of support they need, including doulas, lactation consultants, midwifery, primary care, and support groups. Learn more [here](#)

Parent-Child Assistance Program (PCAP): PCAP is an evidence-based home visitation case-management model for birthing parents on Apple Health who abuse alcohol or drugs during

pregnancy. Its goals are to help mothers build healthy families and prevent future births of children exposed prenatally to alcohol and drugs. A client who is pregnant or postpartum, self-reports heavy substance use during the current or recent pregnancy and has not successfully accessed community resources for substance use treatment and long-term recovery is eligible for PCAP.

More information about the PCAP program can be found [here](#).

988: (call, [text or chat](#) 988) 9-8-8 is a suicide & crisis lifeline that is confidential, free and available 24/7 all year. Anyone can contact to get support for thoughts of suicide, mental health crises, substance use concerns or any kind of emotional distress. Partners or loved ones can also call about someone they are concerned about. Services are available in Spanish and over 240 languages and dialects through interpretation.

For more information, click [here](#).

If you use American Sign Language, you can get crisis support in ASL by visiting [988lifeline.org](#), selecting the “[For Deaf & Hard of Hearing](#)” link and selecting “[ASL Now](#)” on the next page

Native and Strong Lifeline: Native and Strong is a crisis line specifically for native and/or indigenous peoples in Washington state. Anyone can call it by dialing 988 and selecting option 4. Callers will be connected to Native counselors who can support Native people experiencing a mental health crisis, thinking about suicide or seeking emotional support. You can also call if you are concerned about a loved one. Conversations are kept confidential, and counselors consider culture and tradition as they connect with people in crisis.

Visit their website [here](#), or call 866-491-1683

211: 2-1-1 is an easy-to-remember phone number for people to call for health and human service information and referrals and other assistance to meet their needs. Pregnant and postpartum patients can call 2-1-1 (or 1-877-211-9274) to get connected with **mental health providers** within their area.

Click [here](#) for more information.

Maternal Mental Health Hotline: The Maternal Mental Health Hotline is a national 24/7 free confidential support line for individuals before, during or after pregnancy. They offer phone or text access, real-time support, information and referrals to resources, providers and support groups in the area. They also offer counselors who speak English and Spanish and have interpreter services for over 60 languages.

Call or text **1-833-TLC-MAMA (1-833-852-6262)**. TTY users can use a preferred relay service or dial **711** and then **1-833-852-6262**. To see more information, click [here](#).

Crisis Line: Patients thinking of suicide or are in crisis can call 1-866-427-4747.

Swedish Center for Perinatal Bonding and Support: The Center for Perinatal Bonding and Support offers specialized, knowledgeable and timely care to prevent and treat perinatal mood and anxiety disorders and strengthen attachment. By offering compassionate, nonjudgmental, short-term care and consultations, we hope to reduce the shame and stigma that surrounds perinatal mental health. We believe meeting mental health needs in pregnancy and postpartum can have a positive, generational impact on families. Services include Day Program and Reproductive Psychiatry.

For information about the day program, click [here](#). For general information about the Center, click [here](#).

A note on Infant and Early Childhood Mental Health (IECMH):

While infant mental health is not within the scope of this report, it is deeply connected to the well-being of their parents and is undeniably a critical aspect of early childhood development, influencing a child's future emotional, social, and cognitive well-being. When parents experience behavioral health challenges, it can impact their ability to respond sensitively and consistently to their infant's needs, potentially affecting the child's attachment, emotional regulation, and overall development. A secure and nurturing relationship with a caregiver is fundamental for an infant's mental health, providing a sense of safety, trust, and stability. Supporting parent behavioral health is essential not only for the well-being of parents but also for fostering healthy infant development and building strong parent-child relationships. Recognizing and addressing the interconnectedness of infant mental health and parent behavioral health is crucial for promoting optimal outcomes and creating environments where both infants and parents can thrive. The [Washington Association for Infant Mental Health](#) is the only statewide association in Washington for all professionals who support the development of children prenatally through age six; their role is to train, credential, advocate for and strengthen Washington's infant and early childhood workforce in a way that is relationship-based, equitable, and informed by the communities that they serve. Their resources are highlighted in **Appendix D**. For providers, if a parent is displaying behavioral health concerns, it is important to assess the relationship between child and caregiver and refer the family to an [infant mental health specialist](#) for dyad treatment if necessary.