

Researchers demonstrate how vital conditions enable perinatal well-being

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Perinatal mental illness is a leading cause of death during pregnancy and the first postpartum year in the U.S. Alison Stuebe, MD, MSc, professor of maternal fetal medicine in the Department of Obstetrics and

Gynecology at the UNC School of Medicine, authored a study with colleagues on how a holistic approach comprising seven domains can foster conditions for women and birthing people to thrive.

The maternal mortality rate is unacceptably high, and the Centers for Disease Control and Prevention (CDC) estimates that [80% of pregnancy-related deaths](#) are preventable. Contributing to this crisis is perinatal mental illness—a complication of the pregnancy and the postpartum period that includes depression, [anxiety disorders](#), and postpartum psychosis. It's a leading cause of death during pregnancy and the first postpartum year in the United States.

"As a physician, I'm trained to diagnose and treat each of my patients as an individual," said Alison Stuebe, MD, professor of maternal fetal medicine in the Department of Obstetrics and Gynecology at the UNC School of Medicine, "but in fact, the health and well-being of my patients reflect the world we live in. As Esther Perel put it in a recent interview, 'Is there a [mental health crisis](#) or is there a normal behavior and a normal response to a crisis situation?'"

Stuebe and her co-authors led the study, [published](#) in *Health Affairs*, that explores how a [holistic approach](#) comprised of seven domains can support reproductive justice during pregnancy and after birth. The seven domains include: a thriving natural world; basic needs for health and safety; humane housing; meaningful work and wealth; lifelong learning; reliable transportation; belonging and civic muscle.

"Depression and anxiety are the most common complication of pregnancy, and suicide and overdose are leading causes of death during pregnancy and the first postpartum year," said Stuebe, who is the lead author of the paper.

"We need more and better screening and treatment for these conditions,

but even a perfectly functioning mental health system won't enable mothers to thrive. We need to complement investments in [acute care](#) with place-based strategies that address the upstream drivers of health."

In this study, Stuebe and colleagues reviewed the published literature to explore how vital conditions for health and well-being affect mental health for mothers and birthing people. Using the Rippel Foundation's Vital Conditions for Health and Well-Being framework, the paper explores how each of the vital conditions influence perinatal mental health.

For example, for a thriving natural world, air pollution and ambient noise increase depression and anxiety, but living near good quality parks improves maternal mental health. Access to high-quality care and nutritious food improves mental health for pregnancy and birthing people. Unstable housing also increases depression and anxiety, but implementing zoning and funding for housing stabilization for pregnant and parenting people can reduce perinatal mental illness.

The authors also found studies showing how lifelong learning, meaningful work and wealth, and reliable transportation are drivers of mental health. Policies such as expanding the Child Tax Credit, investing in universal, affordable, high-quality child care, establishing supportive learning environments, and aligning public transportation with the needs of pregnant and birthing people can enable wellness.

The center of the Vital Conditions framework is belonging and civic muscle. Funding for group prenatal care and appropriate reimbursement for doulas and community health workers can strengthen belonging.

Moreover, investing in community-led spaces for pregnant and birthing people can foster connection. In Cincinnati, Queens Village offers spaces for Black moms to rest, relax and repower. These community

events grow civic muscle: Queens Village members have created Mama Certified, a Black-mom-led accountability program for maternity hospitals across Cincinnati.

Stuebe and her co-authors note that the United States has the largest happiness deficit for parents among the 40 countries in the Organization for Economic Co-operation and Development (OECD), and we rank thirty-seventh for public spending on family benefits. "If [policy makers](#) value families," they write, "they must invest in policies that enable families to thrive."

More information: Alison Stuebe et al, Cultivating Vital Conditions For Perinatal Well-Being And A Sustained Commitment To Reproductive Justice, *Health Affairs* (2024). [DOI: 10.1377/hlthaff.2023.01452](#)

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