MICHAEL & SUSAN DELL
CENTER *for* HEALTHY LIVING

Healthy children in a healthy world.

We advance health and healthy living for children and families through cutting-edge research, innovative community-based programs, and dissemination of evidence-based practices.

STRATEGIC PLAN GOALS

Center Resources

WEBSITE
msdcenter.org

WEBINARS
go.uth.edu/webinars

NEWSLETTER
bit.ly/MSDCenterNewsletter

EXPERT BLOGS
go.uth.edu/CenterBlogs

SOCIAL MEDIA
@msdcenter

RESEARCH AND RESOURCE STATIONS
go.uth.edu/CenterResources

TX CHILD HEALTH STATUS REPORTS AND TOOLKITS
go.uth.edu/TexasChildHealth

TEXAS RESEARCH-TO-POLICY COLLABORATION PROJECT
go.uth.edu/TXRPCProject

UTHealth Houston School of Public Health | MICHAEL & SUSAN DELL CENTER for HEALTHY LIVING

Nursing Contact Hour Disclosures

- This activity provides 1.0 contact hour(s) of nursing professional development.

Requirements for Completion:

- Attend the session
- Complete online evaluation form

Cizik School of Nursing at UTHealth is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation

Conflicts of Interest to Disclose:

- Neither the Planning Committee members not the presenters today have disclosed any relevant financial relationships related to the planning or implementation of this CNE activity. We have no COI to disclose to you.

Reporting of Perceived Bias:

Commercial bias may occur when a CNE activity promotes one or more products (drugs, devices, services, software, hardware, etc.).

The ANCC COA is interested in the opinions and perceptions of participants at CNE activities.

Today's evaluation form will ask you to inform us of any perceived bias in the presentation today.

Texas Children's

The Division of Public Health Pediatrics

upLIFT for Maternal Mental Health

Christopher Greeley, MD, MS

“When you hand good people possibility, they do great things"

THE TEAM:

Ursula Johnson, PhD

Beth Van Horne, DrPH

Lorena Diaz, LCSW

Michele Parker- Schauer, LCSW

Jennifer Delgado, LCSW

Lindsey Guiney, LMSW

Pamela Merhan, LCSW

<u>Community Health Workers</u>:

Santy Guel

Elizabeth Guzman

Monica Espinoza

<u>Content Support</u>:

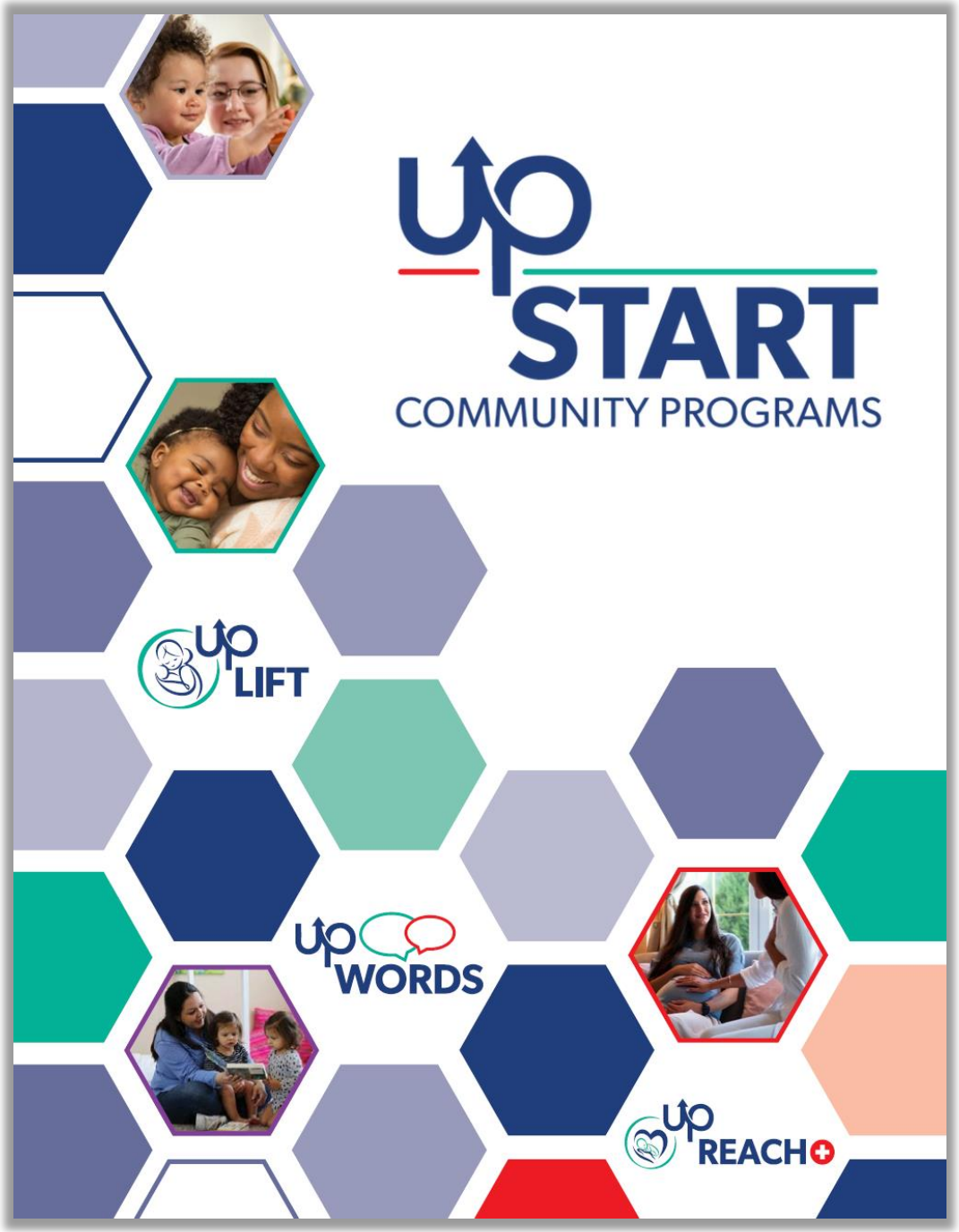
Elisabeth Netherton, MD

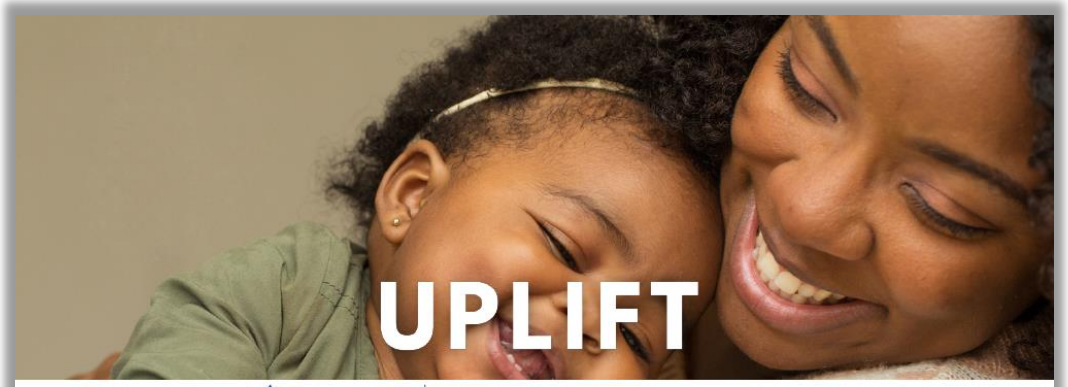
Jessica Rohr, PhD

McClain Sampson, PhD

Ellen Feeley, LCSW-I

UP START UP LIFT





UP START COMMUNITY PROGRAMS | UP LIFT UP WORDS UP REACH

Program Overview

During pregnancy and postpartum, it is not uncommon for women to have feelings of irritability, guilt, sadness, loneliness, and fear. In fact, **perinatal mood and anxiety disorders** (PMADs), such as postpartum depression (PPD), are a leading cause of complications from pregnancy and childbirth. While PMADs are treatable through social support, therapy, and medication, **access to care, cultural norms, and stigma are obstacles for many women**.

In 2019, Baylor College of Medicine's Division of Public Health Pediatrics' (PHP) research faculty conducted a randomized control trial comparing referral to a brief home visitation program facilitated by a licensed social worker to referral to a psychiatrist with 156 participants. This study demonstrated **home visits with social workers were just as effective as the gold standard of psychiatric treatment** in significantly reducing perirnatal depressive symptoms. The study led to the creation of additional modules to better meet the needs of women with perinatal depression and anxiety symptoms.

In 2022, PHP launched the **upLIFT program** at no-cost to pregnant and postpartum women **experiencing perinatal depression and anxiety.** Licensed social workers deliver the evidence-based curriculum in-person or virtually in up to eight one-hour sessions. They use evidence-based tools and strategies to manage participants' emotions and improve their interpersonal skills.

BY THE NUMBERS

Total number served
315

Percent completed program
66%

Average number of sessions
6

Black, 26%
Hispanic, 55%
White, 10%
Other, 9%

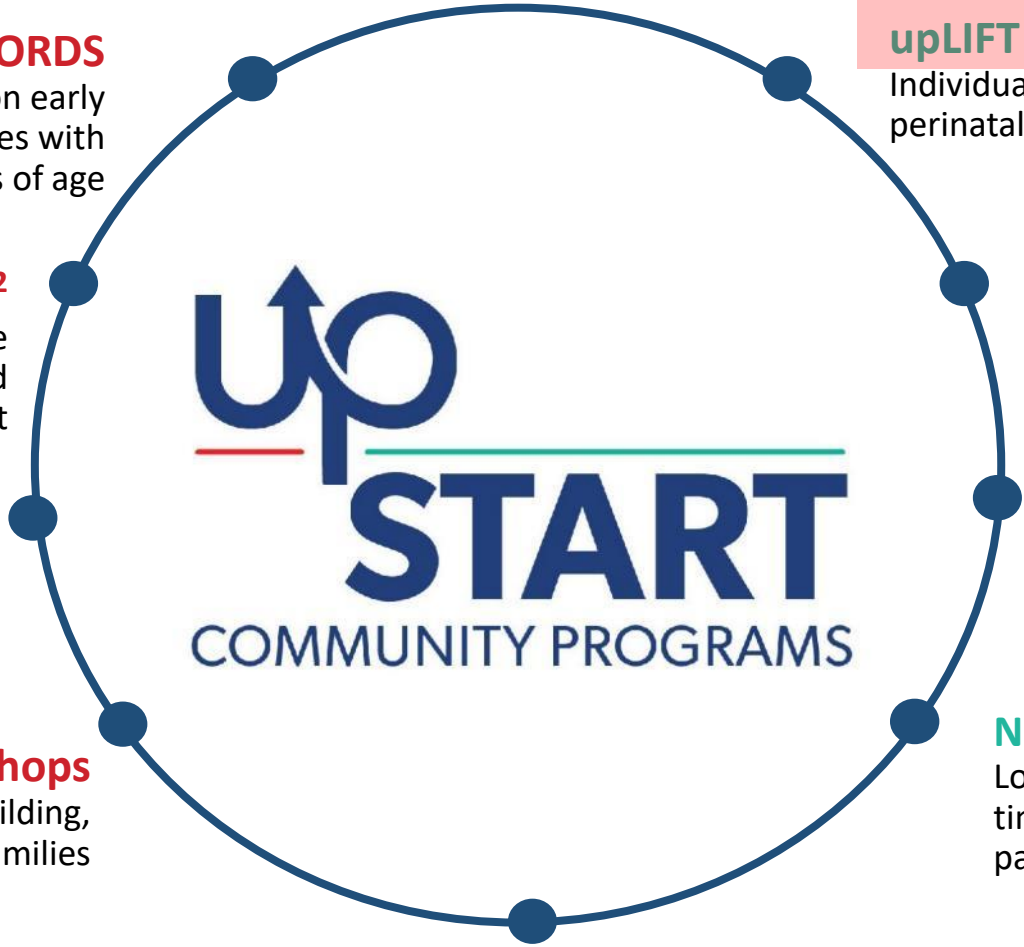
36%
Spanish Speaking

2022-2024 EVALAUTION RESULTS

Depressive Symptoms

Maternal Self-Efficacy
Bonding
Family Functioning
Spcial Support
Concrete Support
Nurturing and Attachment

Universal Goal: All families with young children in the Greater Houston area have access to the knowledge, tools, services, and resources needed for their children to thrive.



upWORDS
Parenting program focused on early language development for families with children 0 – 3 years of age

upWORDS^2
Parenting program focused on positive parenting, emotional regulation, and early brain development

upWORDS Bridges
Individualized support for families with a child with a language or development delay

Family Workshops
Community based education, skill building, and social connections for families

upLIFT
Individual support program for women with perinatal depression or anxiety

upLIFT Group
Virtual group-based program for women with maternal depression or anxiety

upREACH
Brief home visitation program for pregnant women and parents of infants focused on maternal and infant health

Nurse Family Partnership
Long-term home visitation program for first time mothers focused on health, positive parenting, and child development

Community Connections
Assistance with basic needs and connecting families to community resources

History

2014

Houston Perinatal Depression Needs Assessment

Opportunities to Break Barriers & Build Bridges:

Results of the 2014 Postpartum Depression Needs Assessment Houston, Texas

A publication by

children at Risk

October 2014

Bethanie Van Horne, DrPH
Nancy Correa, MPH
Saralyn McIver, PhD
Hannah Vardy

Table 4. Estimated Range of Women Experiencing PPD in Harris County and Texas, 2013

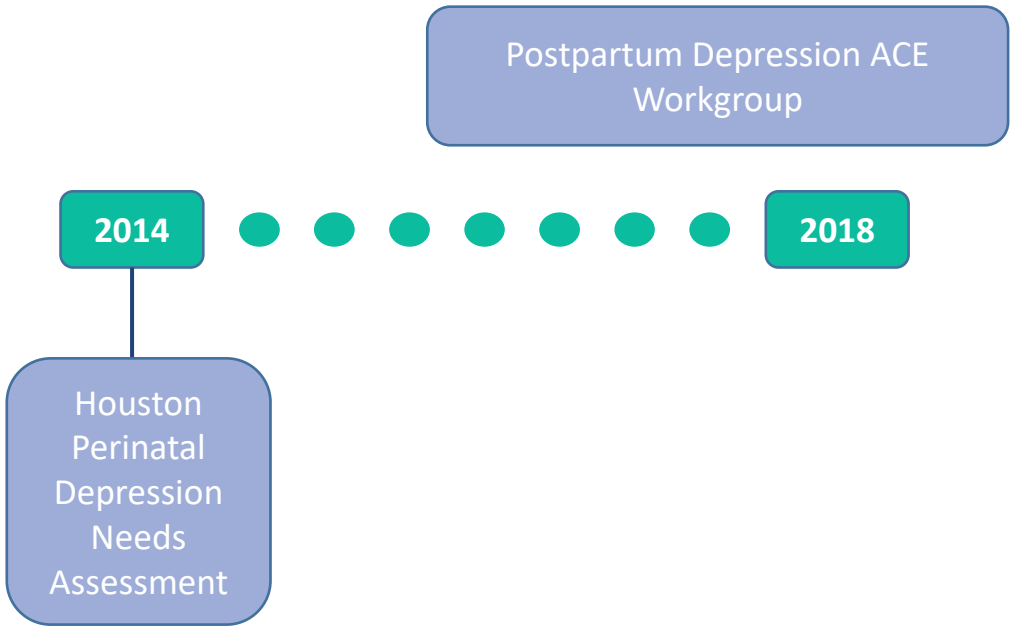
	Births	Mothers living <200% of FPL	Mothers living ≥200% of FPL	Mothers experiencing PPD*
Harris County	70,284	55%	45%	12,827-14,408
Texas	387,079	53%	47%	69,481-78,577

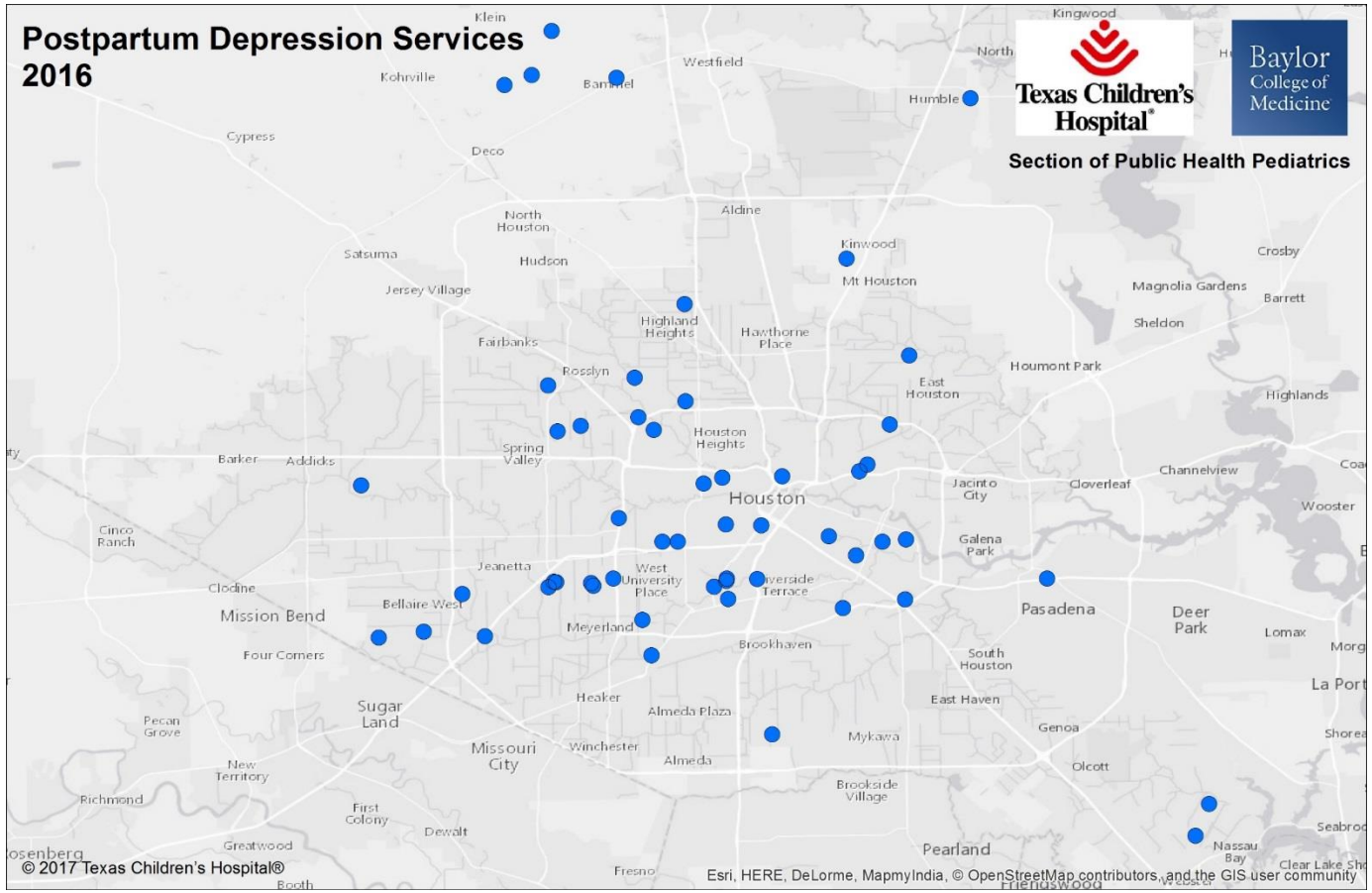
* Computed using 10% as the low end and 15% as the high end for mothers living ≥200% federal poverty line (FPL), 25% was used in calculations for both regions for mothers living below 200% FPL

Table 5. Top 5 Mental Health Disorder Discharge Diagnoses, Females ages 15-44 years, Harris County 2008-2012

	2008	2009	2010	2011	2012	Total
All Hospitalizations	107,826	110,474	99,465	104,147	106,131	528,043
No Mental Disorder Discharge Diagnosis	96,309	98,254	88,211	91,376	92,100	466,250
≥ 1 Mental Disorder Discharge Diagnosis	11,517	12,220	11,254	12,771	14,031	61,793
Mood Disorders	6,575	7,026	6,682	7,489	8,356	36,128
Substance abuse	2,958	2,886	2,528	2,847	2,715	13,934
Anxiety Disorders	1,691	1,893	1,865	2,349	3,006	10,804
Thought Disorders	1,347	1,490	1,307	1,521	1,671	7,336
Perinatal Mental Disorder	931	996	1,006	1,210	1,368	5,511

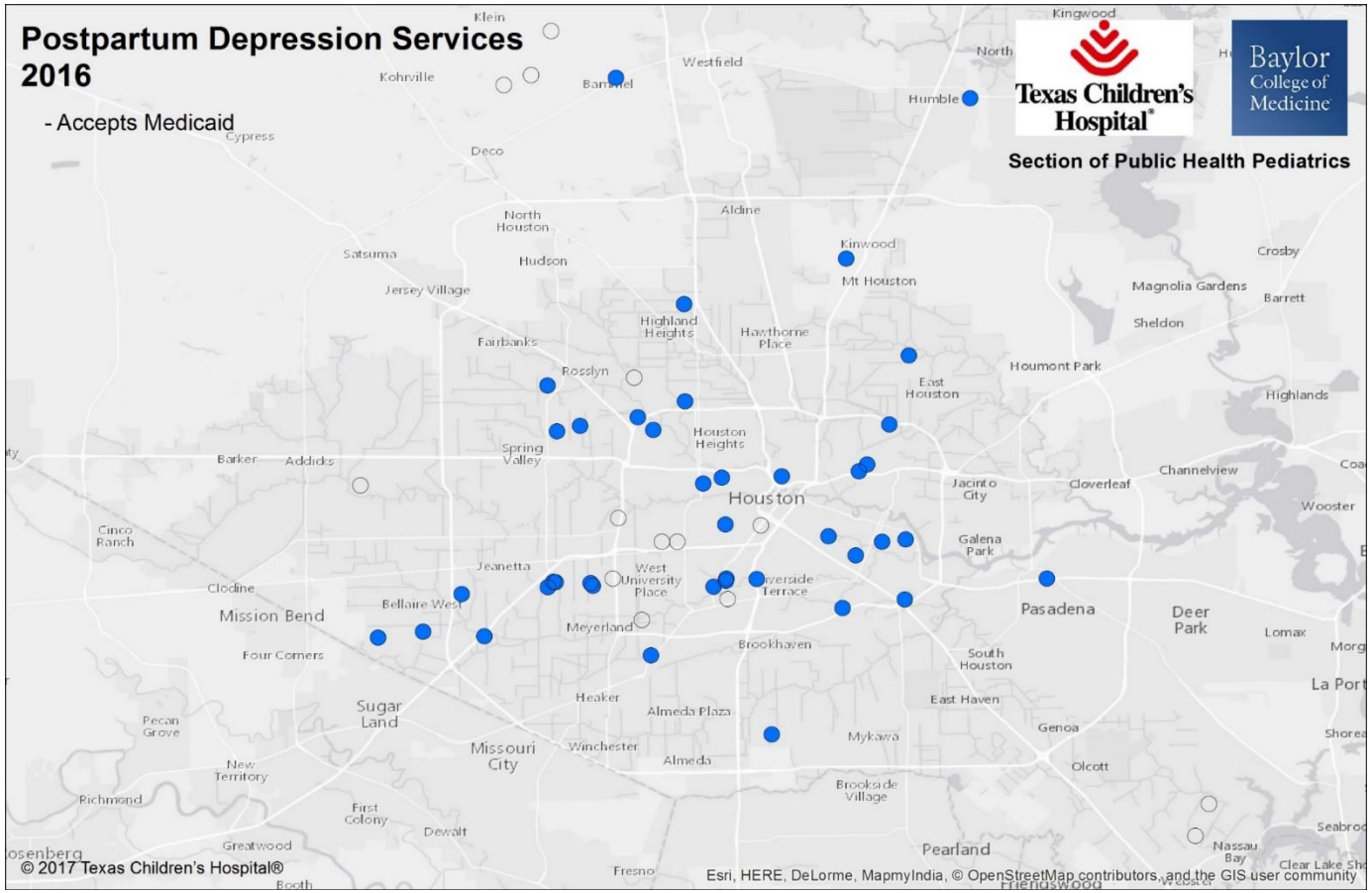
History


Postpartum Depression ACE Workgroup
2014
2018
Houston Perinatal Depression Needs Assessment



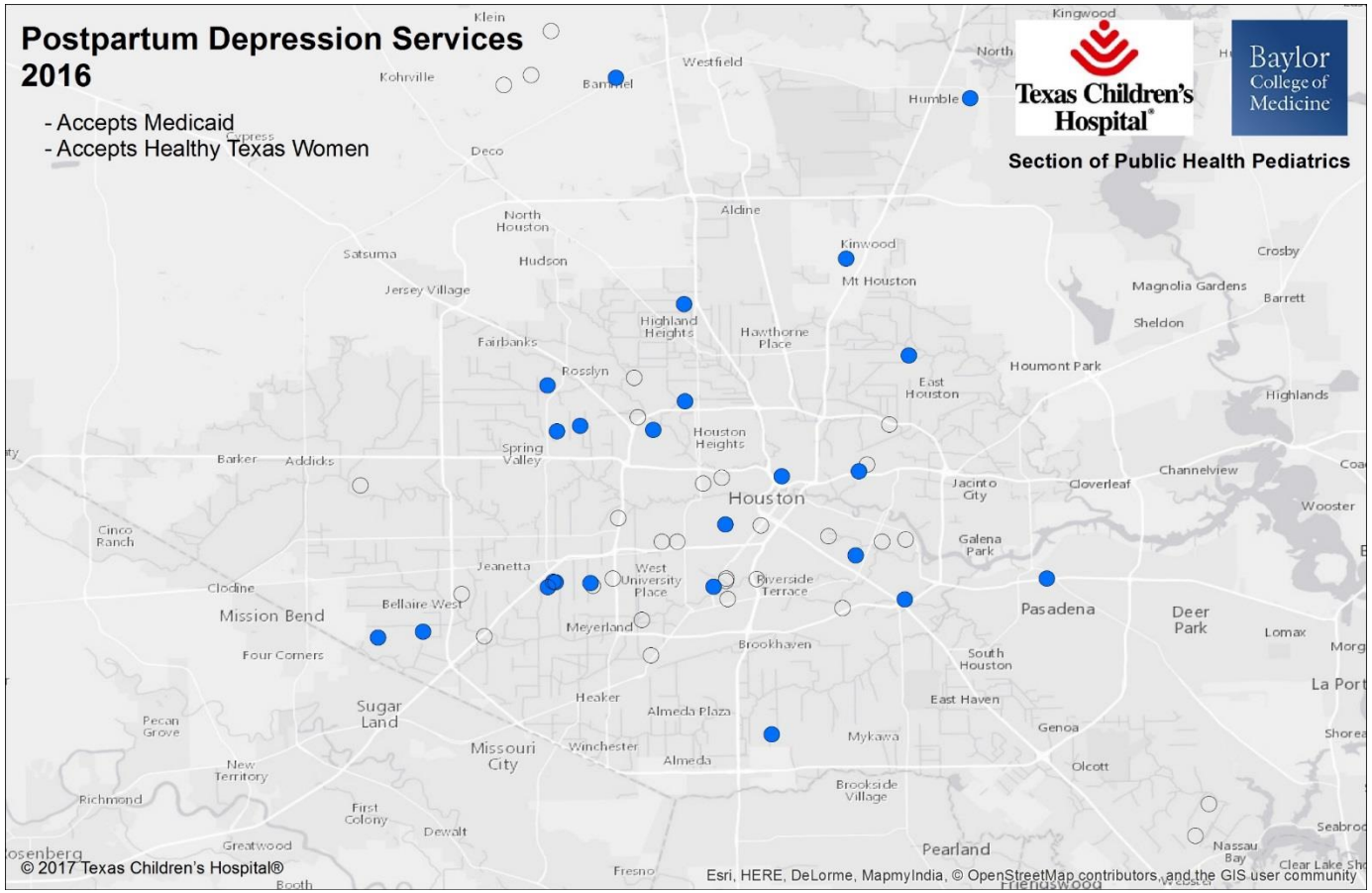
UP START

UP LIFT



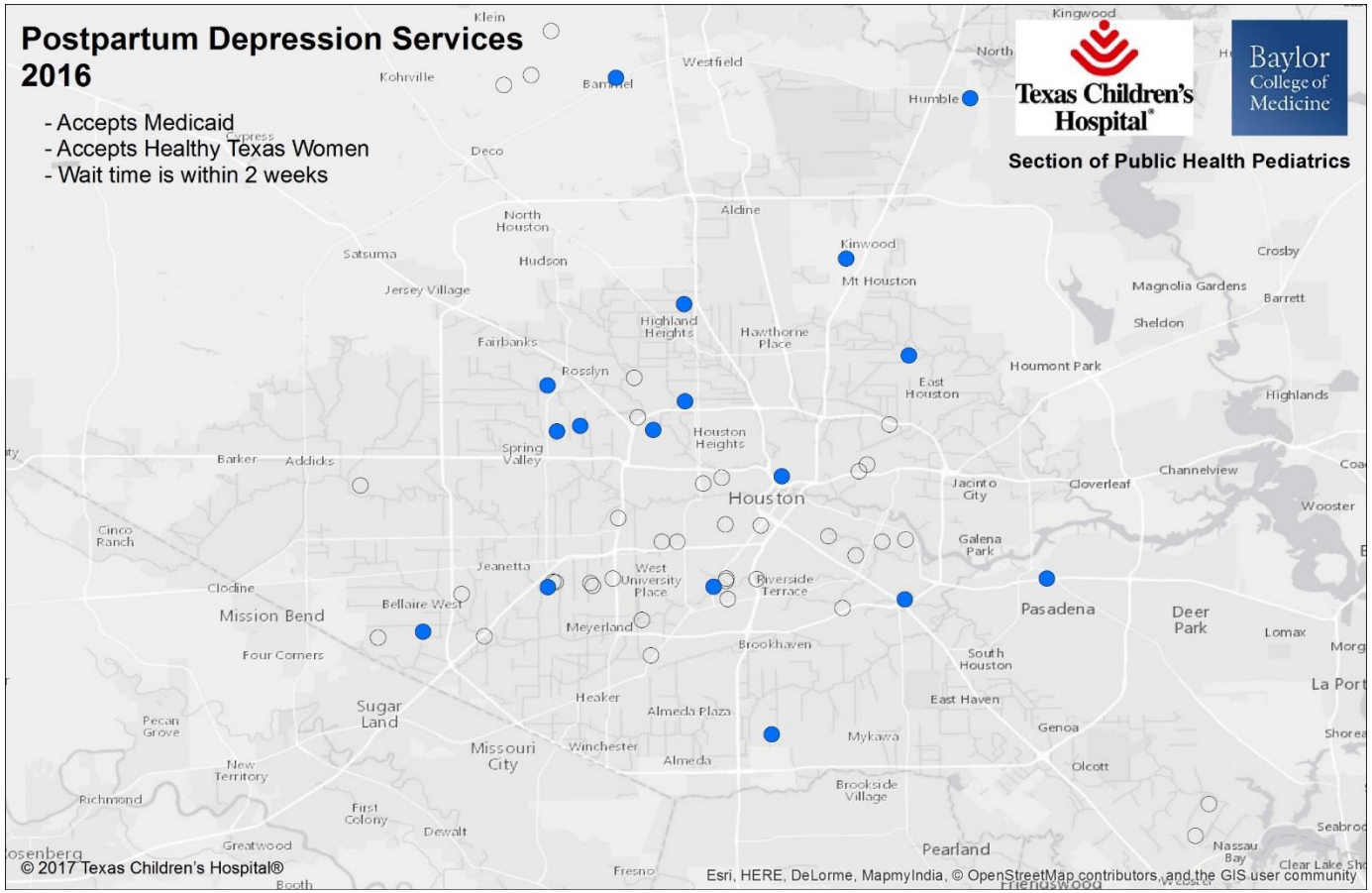
UP START

UP LIFT



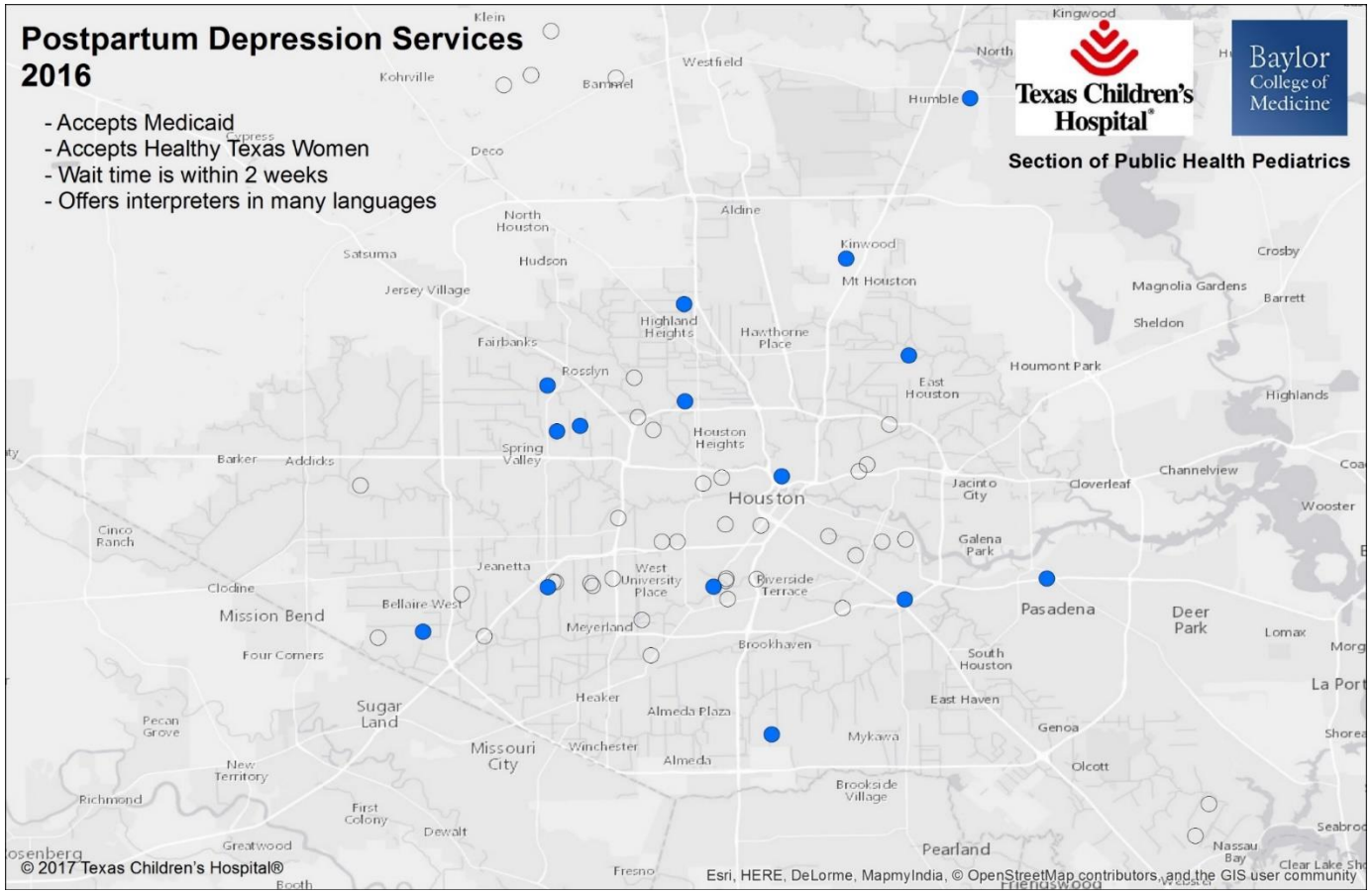
UP START

UP LIFT



UP START

UP LIFT



UP START

UP LIFT

Maternal and Child Health Journal
https://doi.org/10.1007/s10995-019-02780-x

FROM THE FIELD

Outcomes of Implementing Routine Screening and Referrals for Perinatal Mood Disorders in an Integrated Multi-site Pediatric and Obstetric Setting

Lucy J. Puryear[1] · Yen H. Nong[2] · Nancy P. Correa[3] · Katherine Cox[4] · Christopher S. Greeley[5]

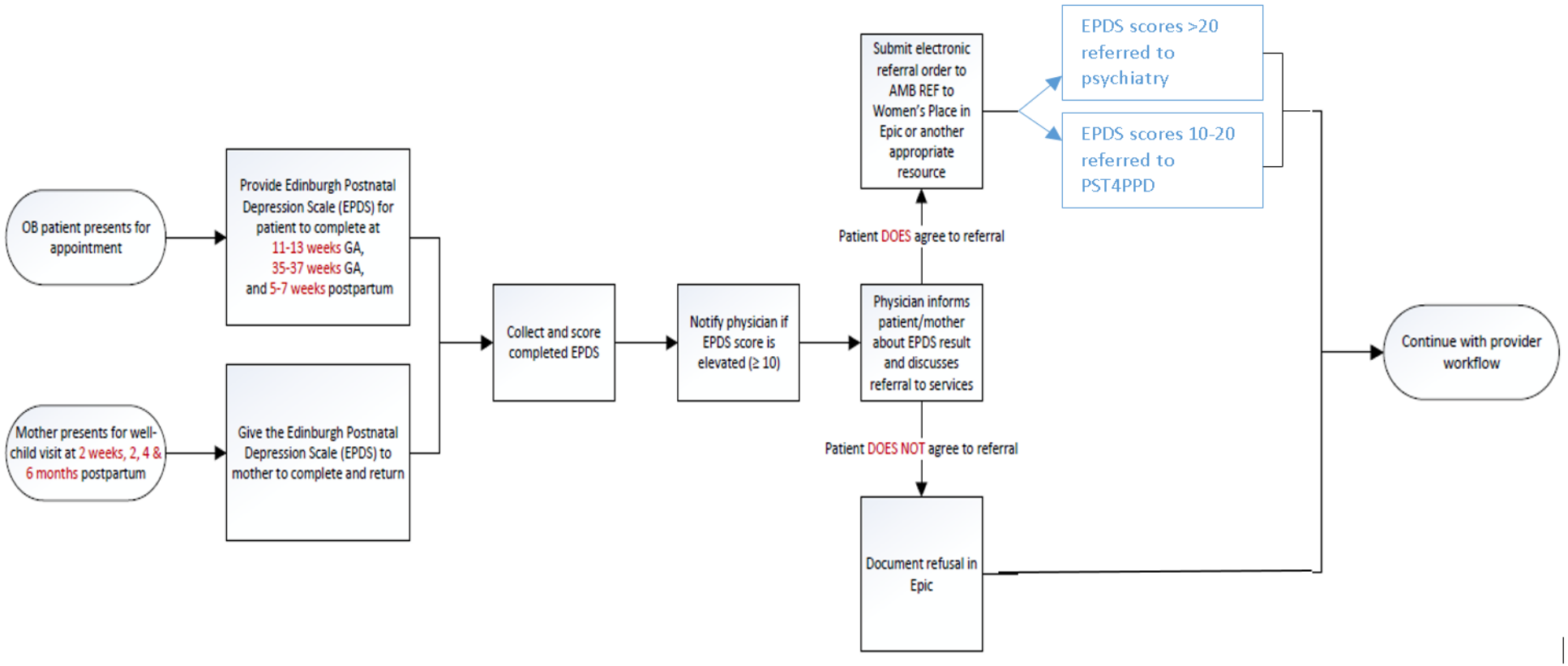
Table 1 Training, screening, referrals, and completed appointments for postpartum depression in obstetric and pediatric practices from May 2014 to July 2018

Clinic type	Practices trained	EPDS screens	Positive screens	Referrals made	Completed appointments[a]
	n	n	n (%)	n (%)	n (%)
Obstetric Integrated Level 5	1	2068	170 (8.2)	185 (108.8)	153 (82.7)
Obstetric Co-located Level 4	3	16,851	1489 (8.8)	2222 (149.2)	1702 (76.6)
Pediatric Adjacently located Level 1	1	3765	220 (5.8)	96 (43.6)	39 (40.6)
Pediatric Coordinated Level 1	50	80,222	4608 (5.7)	1390 (30.2)	278 (20.0)
Total	54	102,906	6487 (6.3)	3893 (60.0)	2172 (55.8)

UP START UP LIFT

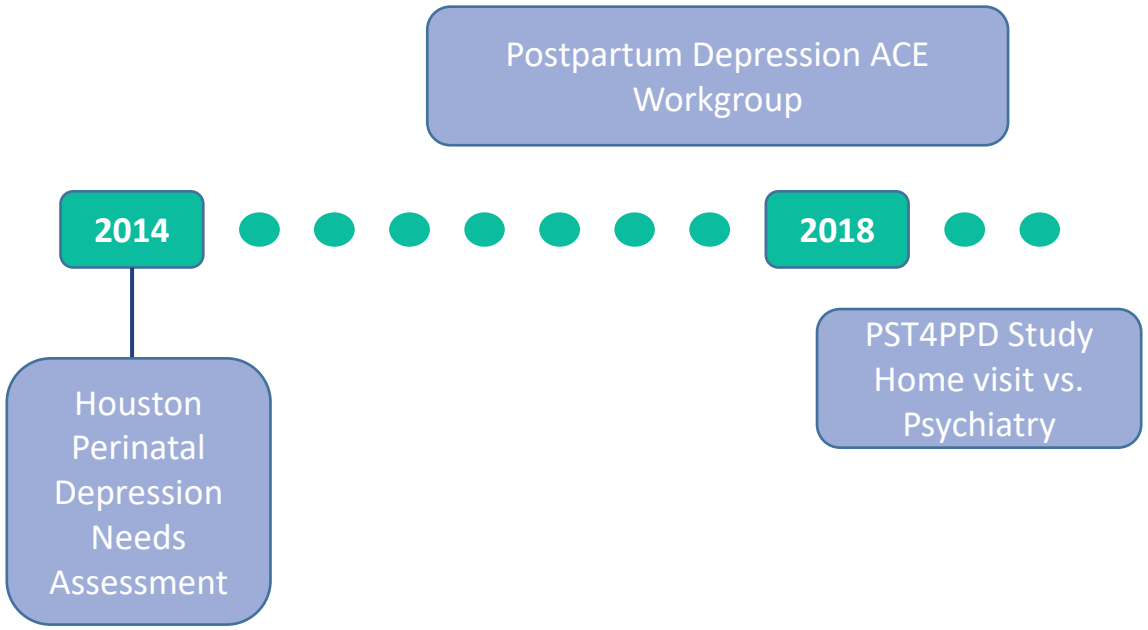
Puryear et al, Mat & Child Hth J, 2019

POSSIBLE FUTURE PPD MODEL OF CARE



*2017

History


Postpartum Depression ACE Workgroup
2014
2018
Houston Perinatal Depression Needs Assessment
PST4PPD Study Home visit vs. Psychiatry

Postpartum Depression Model of Care Study

Purpose: The purpose of this non-inferiority trial is to study if support groups and home visitation are as effective as a referral to a psychiatrist for mothers with signs of mild to moderate postpartum depression.

Background: There are an estimated 10,000 women in Harris County that experience postpartum depression each year. The gold standard of care for a woman with postpartum depression is to be referred to a psychiatrist. The psychiatrist can provide medication, therapy, and/or refer the mother to other specialists or treatment. However, there are not enough psychiatrists in Harris County to meet the demands of services for women with postpartum depression. This research study will assess if support groups and home visitation are as effective as referrals to psychiatrists for mothers with signs of mild to moderate postpartum depression.

Setting: Texas Children's Palm Center is a pediatric practice that serves as a medical home for children regardless of the ability to pay in Houston, Texas. The practice staff includes 3 pediatricians, a nurse practitioner, and a social worker. The standard of care at Texas Children's Palm Center is to screen mothers for postpartum depression at the 2 week well child visit using the Edinburgh Postpartum Depression Scale (EPDS). All mothers that score a ten or higher or respond positively to the question on self-harm are referred to the Women's Place for a follow-up appointment with a mental health professional.

Study population: Mothers that are 18 years of age or older with a baby that is 0 – 4 months of age that receives pediatric care at Texas Children's Palm Center. Inclusion criteria include: an EPDS score of 10 – 20 with a 0 or 1 on the tenth question on self-harm, eligible to receive care at The Women's Place, and speaks English or Spanish.

Budget

The annual budget for this project is as follows:

- Texas Children's Hospital: $85,000 to support the salary, benefits, and mileage of the social worker that will be providing the home visits.
- Baylor College of Medicine: $12,000 for project management and evaluation
- University of Houston: $3,000 for training and technical assistance on the home visitation model

Thank you again for the opportunity to apply for funding from the TMC Health Policy Institute. Please do not hesitate to reach out to us with any questions at npcorrea@texaschildrens.org or 832-824-7325.

Kindly,

Nancy Correa, MPH, Texas Children's Hospital
Christopher Greeley, MD, MS, Texas Children's Hospital
Lucy Puryear, MD, Baylor College of Medicine
McClain Sampson, MSSW, PhD, University of Houston
Bethanie Van Horne, DrPH, Baylor College of Medicine

this study we will compare the effectiveness of a home visitation program, "PST4PPD," to standard practice, a referral to a psychiatry visit. PST4PPD uses trained mental health professionals to deliver five home visits with new moms using a problem solving tool based curriculum. Pilot research on PST4PPD has shown positive results for decreasing depression symptoms. We believe that PST4PPD will be as effective if not better than the current standard practice for mild to moderate PPD treatment. Thus, will provide an additional treatment option that minority and low-income mothers may prefer, find more accessible, and is as effective, if not more so, than the current option of being referred to psychiatry.

Received: 14 April 2021 | Revised: 25 October 2021 | Accepted: 9 November 2021

DOI: 10.1111/hsc.13658

Health and Social Care in the community WILEY

ORIGINAL ARTICLE

A promising new model of care for postpartum depression: A randomised controlled trial of a brief home visitation program conducted in Houston, Texas, USA

Bethanie S. Van Horne DrPH, MPH[1,2] | Yen H. Nong MPH[1,2] | Cary M. Cain PhD, MPH, RN[1,2] | McClain Sampson PhD[3] | Christopher S. Greeley MD, MS[1,2] | Lucy Puryear MD[4]

[1]Department of Pediatrics, Baylor College of Medicine, Houston, Texas, USA

[2]Division of Public Health Pediatrics, Texas Children's Hospital, Houston, Texas, USA

[3]Graduate College of Social Work, University of Houston, Houston, Texas, USA

[4]Obstetrics and Gynecology, Menninger Department of Psychiatry, Baylor College of Medicine, Houston, Texas, USA

Correspondence
Bethanie S. Van Horne, Department of Pediatrics, Baylor College of Medicine, 6621 Fannin Street, MC A2275, Houston, TX 77030, USA.
Email: bethanie.vanhorne@bcm.edu

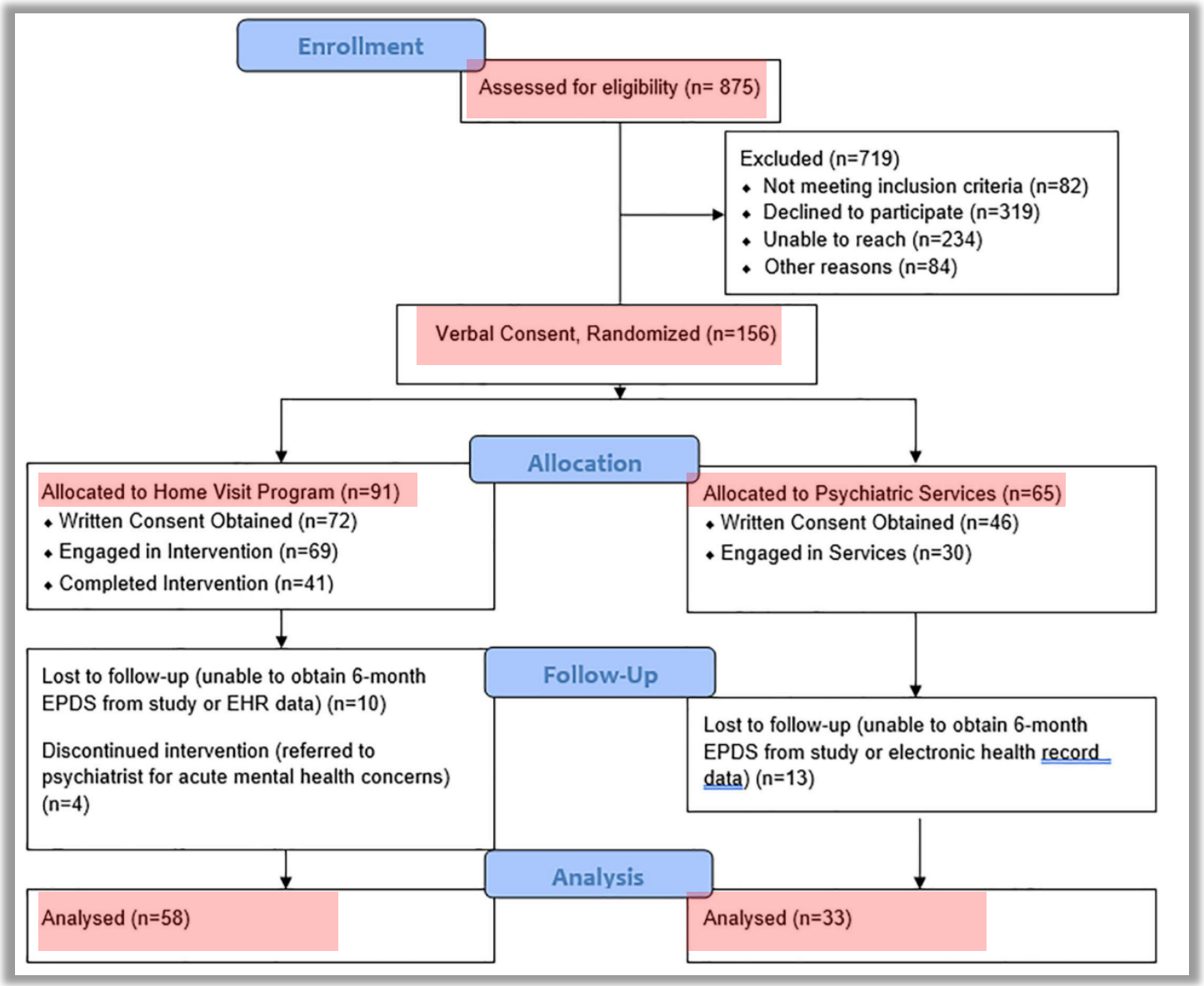
Funding information
This study was made possible through

Abstract

Postpartum depression (PPD), a perinatal mood and anxiety disorder (PMAD), is a leading cause of complications of pregnancy and childbirth. In the United States, approximately 20 percent of women suffer from PMADs. In Houston, Texas, an estimation of 12,000 – 15,000 women experience PPD each year. Within the Texas Children's Paediatrics network, a large paediatric network located in Houston, Texas, mothers are screened during paediatric well-child visits and those screening positive receive a referral to a psychiatrist with the network. However, there are not enough psychiatrists to meet the demand of services and Black, Latina, and women on Medicaid during pregnancy are less likely to attend a psychiatric visit compared to White, non-Hispanic women. This study used a randomised control trial design to measure the effectiveness of an alternative treatment option for a racially diverse population of postpartum women with mild to moderate symptoms of PPD, a five-session home visitation program using the Problem-Solving Tools for PPD (PST4PPD) model delivered

UP START UP LIFT

Van Horne et al, Health & Social Care, 2021



Van Horne et al, Health & Social Care, 2021

TABLE 2 Number of completed visits by study group

	Psychiatry *n* (%)	Home visitation *n* (%)
0	16 (35%)	3 (4%)
At least 1	30 (65%)	69 (96%)
At least 2	17 (37%)	56 (78%)
At least 3	10 (22%)	48 (67%)
At least 4	7 (15%)	44 (61%)
5 or more	6 (13%)	39 (54%)

UP START UP LIFT

Van Horne et al, Health & Social Care, 2021

upLIFT

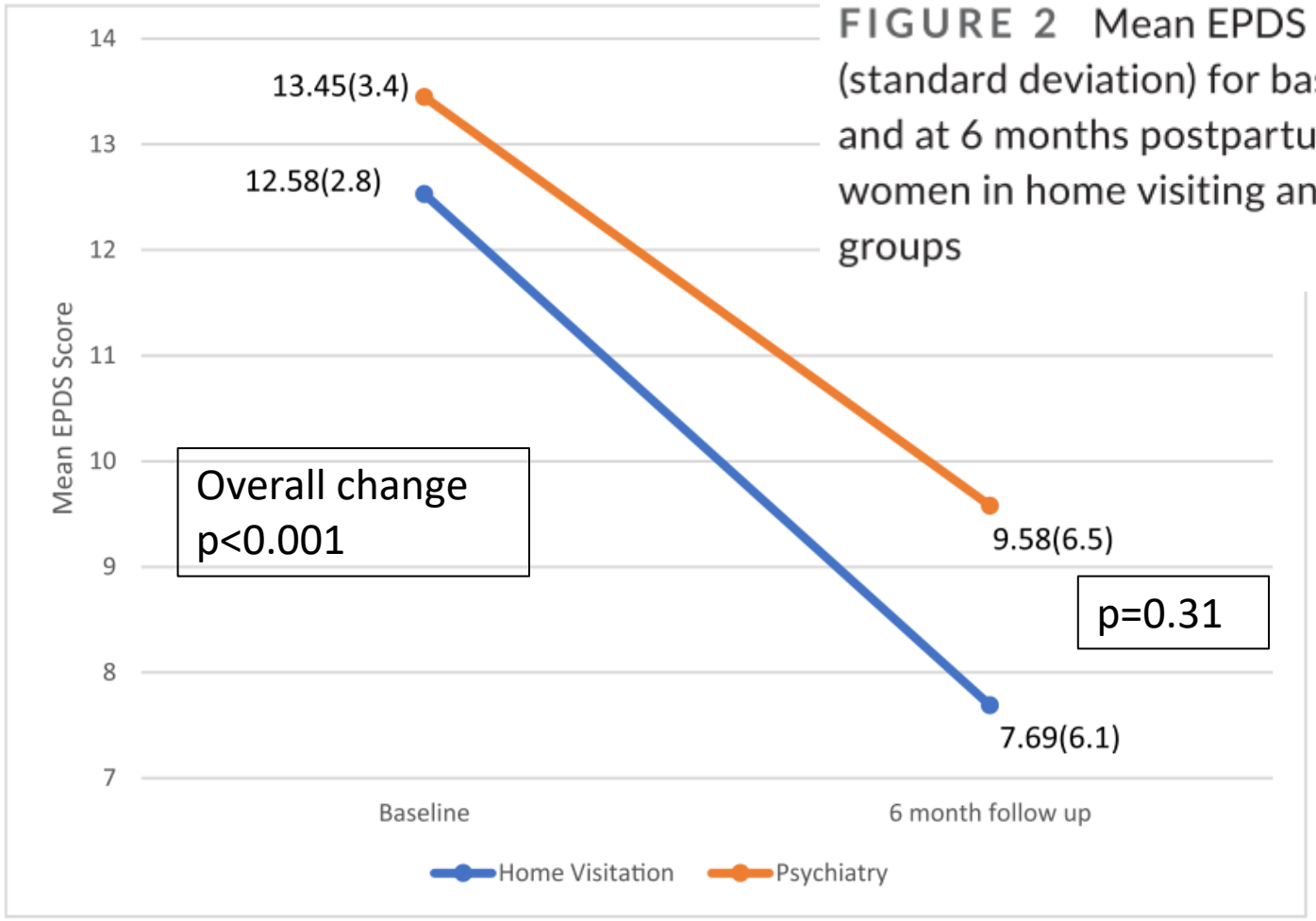


FIGURE 2 Mean EPDS scores (standard deviation) for baseline and at 6 months postpartum for all women in home visiting and psychiatry groups

Van Horne et al, Health & Social Care, 2021

upLIFT

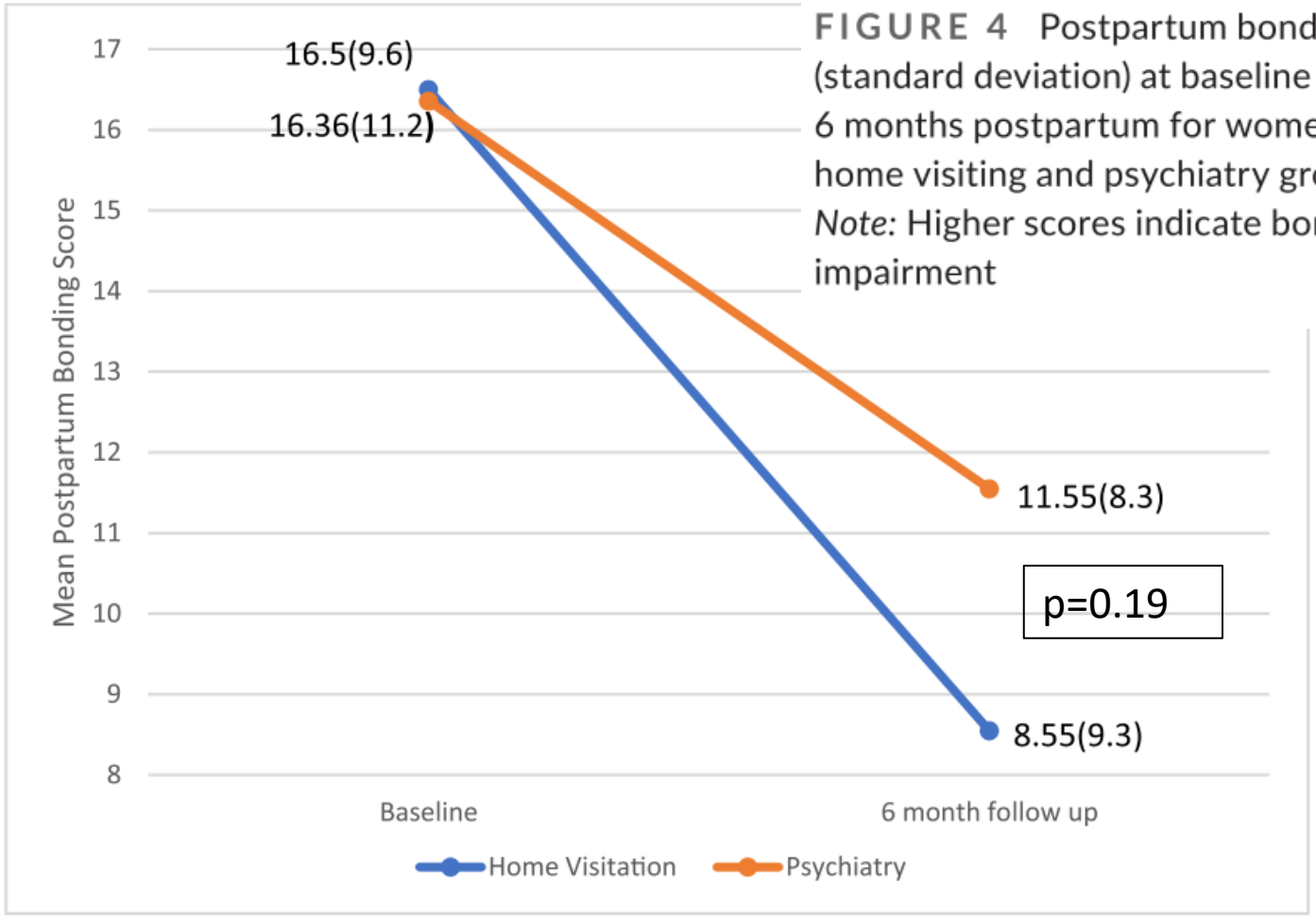


FIGURE 4 Postpartum bonding scores (standard deviation) at baseline and at 6 months postpartum for women in the home visiting and psychiatry groups. *Note:* Higher scores indicate bonding impairment

Note: Higher scores indicate bonding impairment.

Van Horne et al, Health & Social Care, 2021

upLIFT

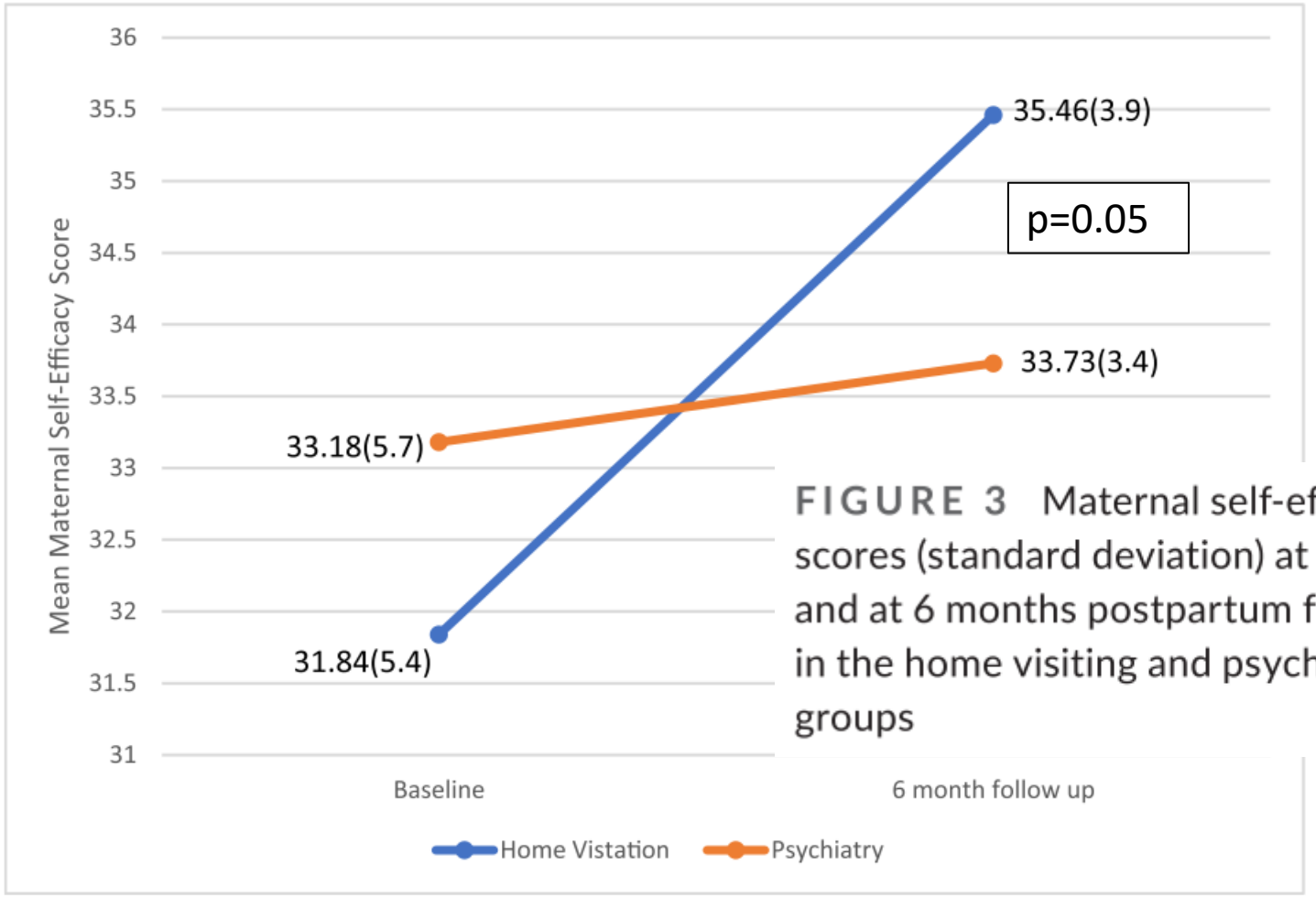


FIGURE 3 Maternal self-efficacy scores (standard deviation) at baseline and at 6 months postpartum for women in the home visiting and psychiatry groups

Van Horne et al, Health & Social Care, 2021

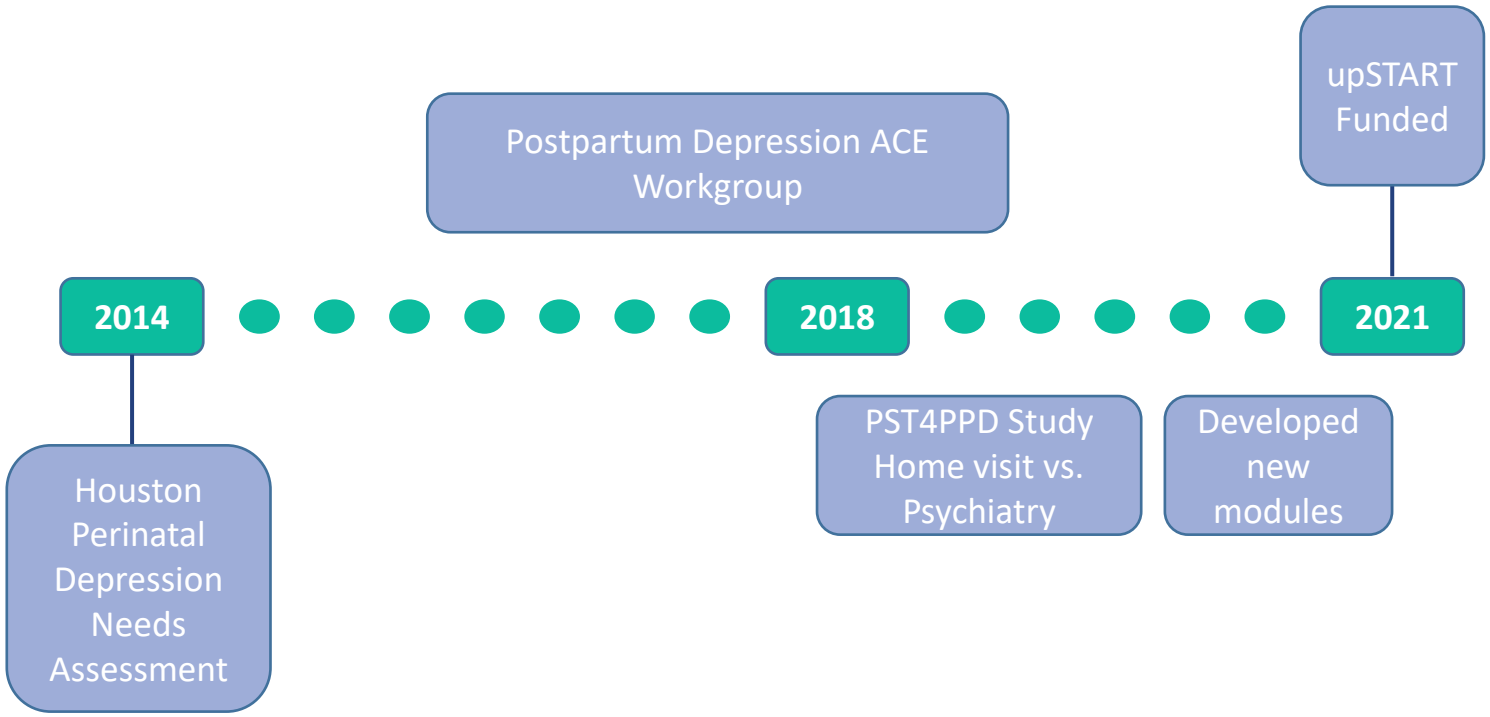
Module Matching

IF	THEN
You are avoiding doing certain things because it makes you anxious, like changing the baby, feeding them, etc.	Avoidance/Exposure
There are times you feel frozen because you're so upset...	
If upset feelings are in your body	Breathing
If you need to feel better fast so you can take care of something	Distress tolerance
If you are feeling upset about something you cannot change	Dropping anchor
You can tell that your thoughts are really bothering you...	
And they don't seem logical	CBT
And they are worries you can't talk yourself out of	Thought defusion
You feel like your emotions are on a roller coaster	Emotion regulation
You're having trouble getting what you want from your partner, family, or friends	Interpersonal communication
You feel a little bit disconnected from yourself and your baby	Mindfulness
You are having trouble completing important task	PST
Your thoughts or worries are keeping you from sleeping	CBT-I (Sleep)
You are getting swept away by expectations about motherhood that are hard to keep up with	Values
Your support system is upsetting you because they aren't respecting boundaries	Boundaries
You want to learn more about an evidence-based therapy for PPD focused on how your role has changed in your family	IPT
You are feeling strong guilty feelings	Guilt
Some aspect of your pregnancy or childbirth was traumatizing and you still think about it	Traumatic pregnancy

TOOLS FOR CHALLENGES

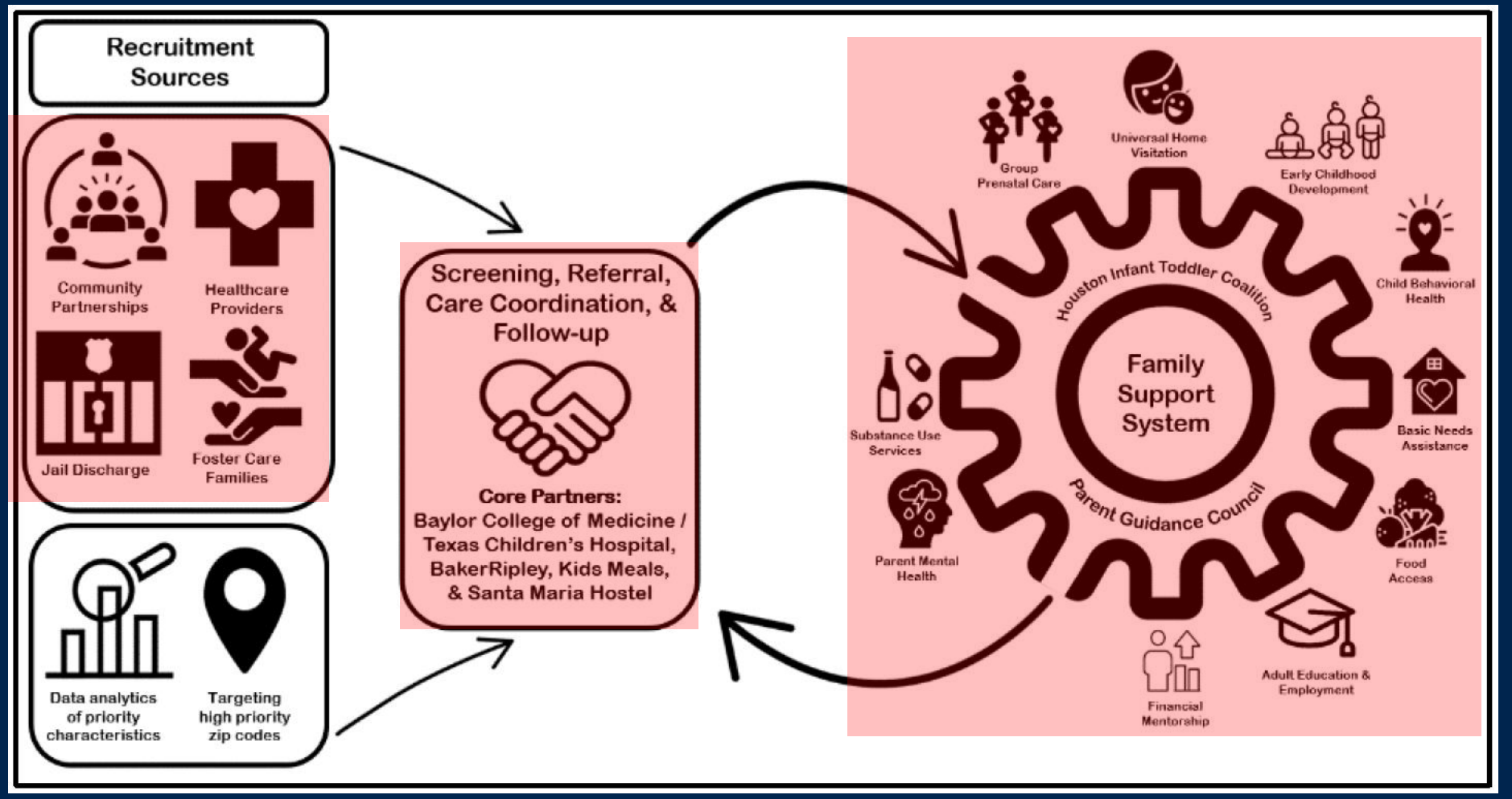
UP START UP LIFT

History


upSTART Funded
Postpartum Depression ACE Workgroup
2014
2018
2021
Houston Perinatal Depression Needs Assessment
PST4PPD Study Home visit vs. Psychiatry
Developed new modules

upSTART

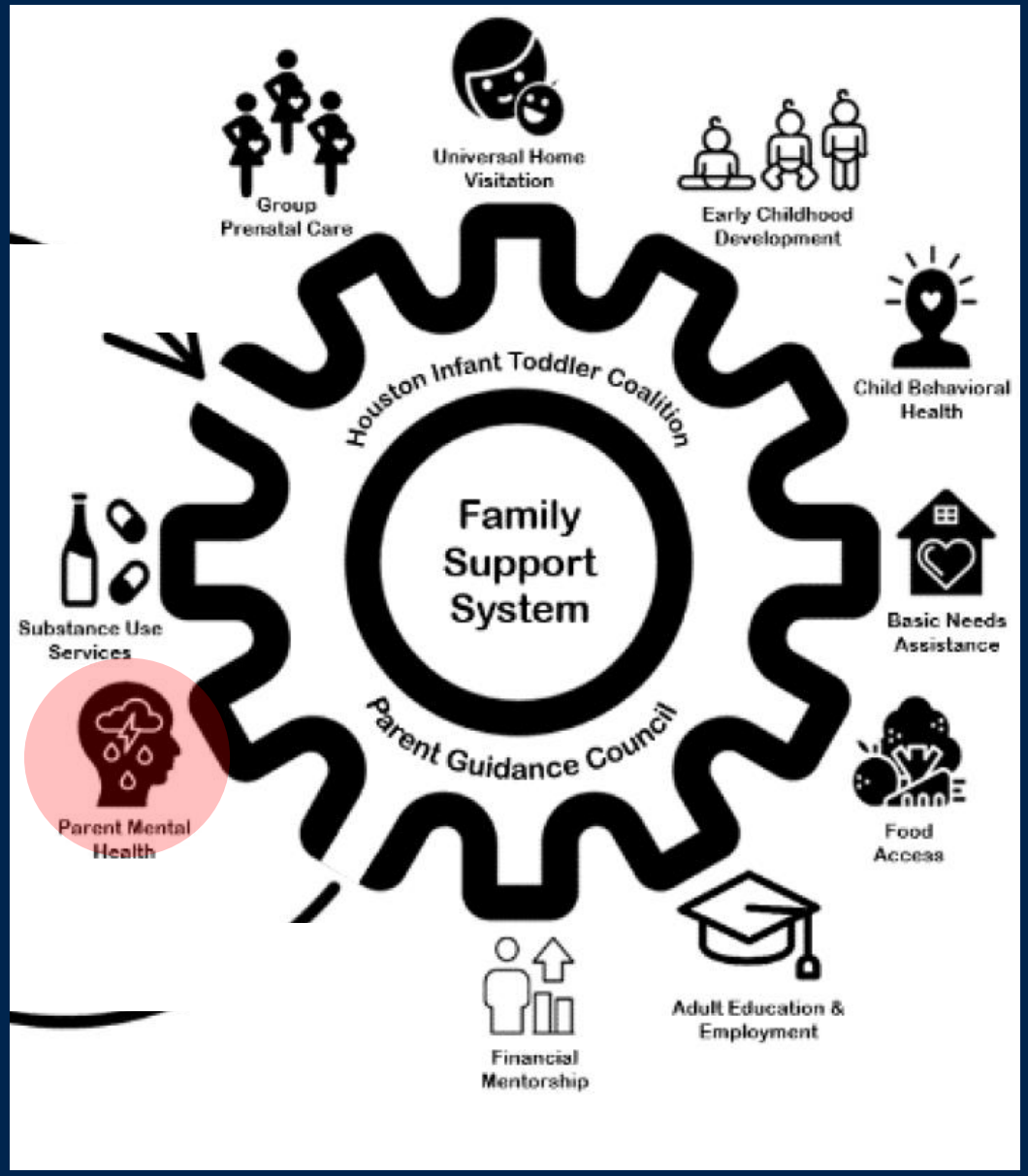
- A multi-component, community-based maternal and family support system
  - -Multidisciplinary
  - -Ecologically based
  - -Modular
  - -Skill building
  - -Early brain development at the core (prenatal to 5y)



UP START

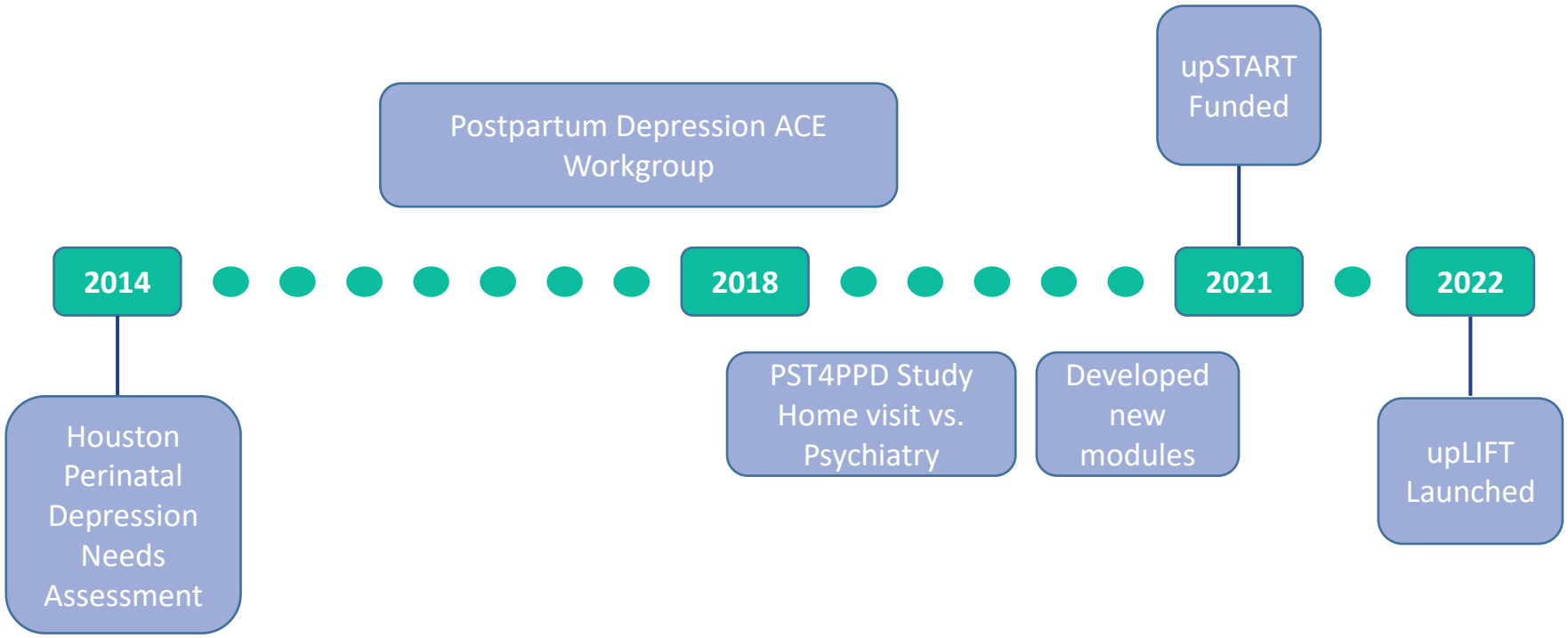
Texas Children's Hospital

Baylor College of Medicine



- Postpartum depression home visitation
  --upLIFT

History


Postpartum Depression ACE Workgroup
upSTART Funded
2014
2018
2021
2022
Houston Perinatal Depression Needs Assessment
PST4PPD Study Home visit vs. Psychiatry
Developed new modules
upLIFT Launched

UP START

UP LIFT

Home Visitor

Licensed Social Worker

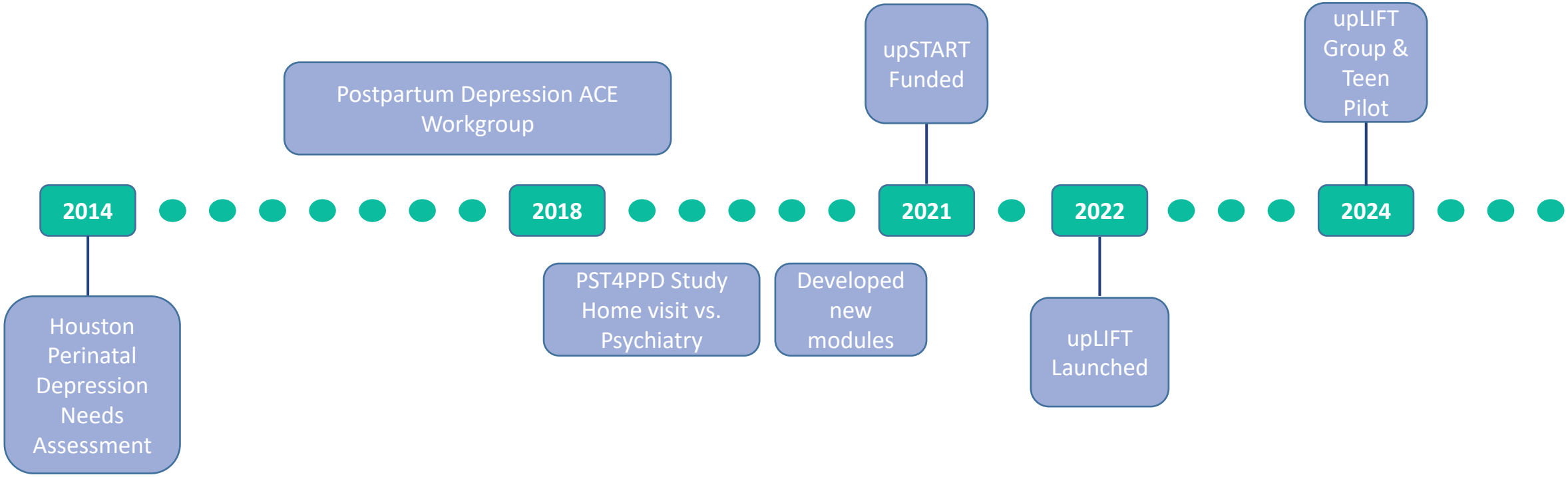
Home Visits

Up to eight 1-hr sessions
available in-person or virtual

Evidence-based curriculum

16 individualized modules

History


2014
Houston Perinatal Depression Needs Assessment
Postpartum Depression ACE Workgroup
2018
PST4PPD Study Home visit vs. Psychiatry
Developed new modules
upSTART Funded
2021
2022
upLIFT Launched
upLIFT Group & Teen Pilot
2024

UP LIFT Group

Home Visitor

Licensed Social Worker

Group Sessions

Up to eleven group virtual sessions

Support

Learn strategies for coping with the challenges of parenting with depression/anxiety

UP LIFT Teen

Facilitator

Licensed Social Worker

Evidence-based curriculum

16 modules with worksheets

Individual Sessions

Up to eight 1-hr sessions available in-person or virtual

Community Connections

Basic needs support, resource referral, & follow-up

Session Topics

Skill-based Modules

1. Avoidance and Exposure
2. Breathing Techniques
3. Cognitive Behavioral Therapy
4. Distress Tolerance
5. Emotion Regulation/Emotional Hygiene
6. Dropping Anchor
7. Interpersonal Effectiveness
8. Mindfulness
9. Problem-Solving Therapy
10. Sleep Hygiene (Cognitive Behavioral Therapy for Insomnia)
11. Thought Defusion
12. Values Clarification/Goal Setting

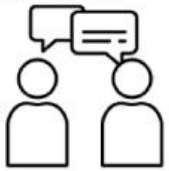
Psychoeducation Modules

1. Boundaries
2. Interpersonal Therapy
3. Maternal Guilt
4. Traumatic Pregnancy and Childbirth

UP START

The importance of COMMUNICATION

Major life changes like childbirth can cause, or exacerbate, communication challenges among partners. It is common to have more disagreements and conflicts as everyone learns to navigate the new routine of life. It is best to let intense emotions dissipate before attempting to communicate our thoughts and feelings. Learning to communicate effectively may help in decreasing the intensity of those emotions.



Skills for effective communication in relationships:

- **Self-disclosure**— openness in communicating your thoughts and feelings
- **Listening**— trying to understand the other person without judgment or blame
- **Feedback**— responding to another person's self-disclosure in a constructive and respectful manner

For situations in which you feel safe, and in which violence is ***not*** a concern, the D.E.A.R.M.A.N. skill can help you express your needs, and help you to get those needs met.

D.E.A.R.M.A.N.

D) Describe the situation

E) Express how you feel

A) Assert your needs/Ask for what you want

R) Reinforce them for giving it to you

M) Stay mindful of your goal

A) Act confident

N) Negotiate appropriately

Participant Snapshot

Served: 315+ participants

Completed: 66%

DEMOGRAPHICS

26% Black
55% Hispanic
10% White

36% Spanish Speakers

18% Pregnant at Enrollment

47% High School or less

Needs

49% Housing Insecurity

26% Transportation Instability

37% Food Insecurity

23% Utility Instability

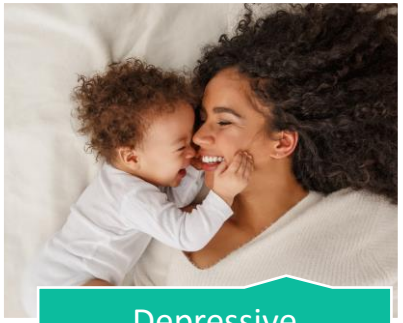
35% Health Insurance needs

48% 3 or more needs

UP START

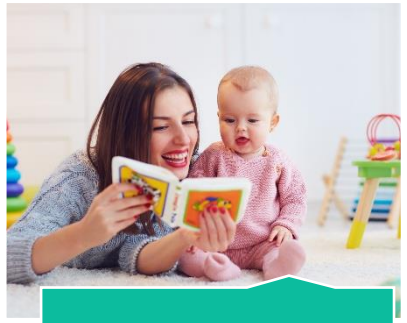
Outcomes

Significant Improvements in Key Outcomes:



Depressive Symptoms

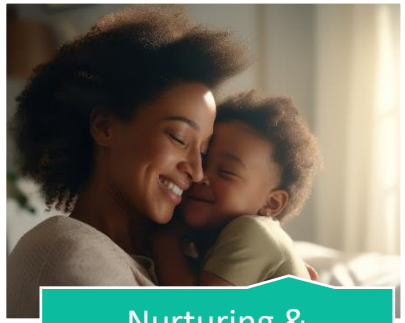
Bonding



Maternal Self-Efficacy

Social Support

Concrete Support



Nurturing & Attachment

Family Functioning

UP START

"It has helped me build my relationship with my family and it has made me feel good as a mother! I am a better mother because of it."

"I was literally going to end my life until upLIFT and [Social Worker] came into my life and she held my hand and told me everything was going to work out."

"The upLIFT program is by far the best program that I've participated in for my depression. It helped me find new ways to bond with my babies and learn different ways to handle my depression as a whole."

"With the program, I feel way better. I feel way comfortable. [W]hen my anxiety creeps up on me, I can say, 'No, no. I know how to handle you now. I don't need you to take over my whole day, or week or month.' The fact that I haven't really felt depressed is good. This has helped me a lot."

upSTART

upLIFT Referrals & Parent Feedback

upLIFT Eligibility: Symptoms of perinatal depression or anxiety in pregnancy or up to the first year after childbirth that resides Harris or the surrounding counties

Enrollment: www.redcap.link/uplift

upLIFT Group Eligibility: Symptoms of maternal depression or anxiety in pregnancy or up until their child 5 years old that resides Harris or the surrounding counties

Enrollment: https://redcap.link/upliftgroup

upliftformoms@bcm.edu

"It has helped me **build my relationship with my family** and it has made me **feel good as a mother**! I am a **better** mother because of it."

"The program helped me to stop **thinking so negative** and looking at things better and also to understand that is not just (with) the kids. **I have to take care of myself and loving myself as a woman first.**"

"I was literally going to end my life until upLIFT and [Social Worker] came into my life and **she held my hand and told me everything was going to work out**."

upLIFT Group Overview

- **SUPPORT**: Licensed social workers facilitate the group with community health workers providing support and community connection services.
- **ACCESSIBLE**: 11 weekly sessions are virtual.
- **TARGETED CONTENT**: Psychoeducation and skill-building strategies are used to reduce depression and anxiety symptoms.
- **CONNECTION**: Focus is on participants building a network of understanding and belonging.

UP START

upLIFT Group Session Topics

- Motherhood & Identity Part 1
- Motherhood & Identity Part 2
- Everyone is Emotional
- Managing Your Emotions to Support Your Child
- Mindfulness & Stress Reduction
- Understanding and Managing Unwanted Thoughts
- Emotion Regulation
- Effective Communication
- Sleep Management
- Self-Compassion
- Celebrate & Reflect

UP START

upLIFT Group Feedback

"[upLIFT Group] Helped me be a more patient parent and more kind to myself on my journey."

"Weekly sessions were the highlight of my week, all our ladies were amazing, [Staff] was the best!"

"I received very practical advice for everyday life. As a mother who suffers from depression, this group has been a great escape from my routine, and a help, since I really don't like to talk to friends about it because I feel judged or I don't feel like talking about my personal problems with anyone. Thank you for the guide to find myself as a woman, and not get totally lost in motherhood, for the conversations, for teaching me to take care of myself..."

UP START

Eligibility

- upLIFT: Pregnant or postpartum women (up to 12 months)
- upLIFT Group: Pregnant and/or have a child under three years-old*
- upLIFT Teen: A teenager or young adult

All upLIFT Participants:

- Must live in one of the following counties: Brazoria, Chambers, Fort Bend, Galveston, Harris, Liberty, Montgomery, or Waller*
- Demonstrate symptoms of depression and anxiety
- Cannot exhibit or be diagnosed during pregnancy/postpartum with:
  - Psychosis
  - Schizoaffective disorder or schizophrenia
  - Active suicidal and/or homicidal thoughts

UP START

upLIFT Group Started: 2024 Total Served: 182 Families
upLIFT Started: 2022 Total Served: 430 Families

TARGET POPULATION

- Pregnant or postpartum women experiencing symptoms of depression and/or anxiety in the year after birth

COUNTIES

- Harris, Brazoria, Chambers, Fort Bend, Galveston, Waller, or Liberty

DEMOGRAPHICS

- 26% Black, 55% Hispanic, 10% White
- 36% Spanish Speakers
- 18% Pregnant at Enrollment

SIGNIFICANT INCREASES IN:

- Postpartum Bonding
- Maternal Self-Efficacy
- Family Functioning
- Social Support
- Concrete Support
- Nurturing and Attachment

SIGNIFICANT DECREASES IN:

- Maternal Depression Symptoms

upLIFT Programs

Home visitation mental health support program for pregnant and postpartum (up to 12 months) women experiencing depression and anxiety symptoms.

upLIFT

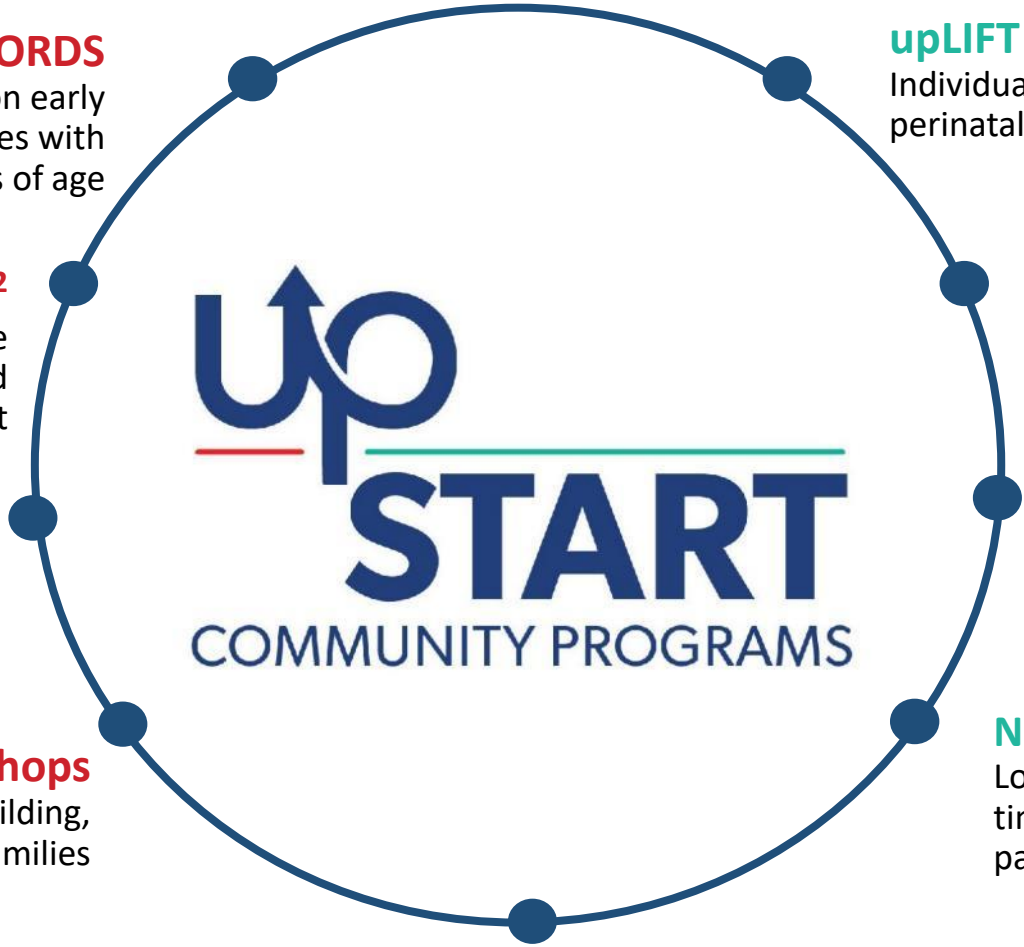
Home visitation mental health support program ***specifically designed for teens*** who are pregnant and postpartum (up to 12 months) experiencing depression and anxiety symptoms.

upLIFT Teen

Virtual support group for pregnant and parenting (up to five-years-old) women who are experiencing depression and anxiety symptoms.

upLIFT Group

Universal Goal: All families with young children in the Greater Houston area have access to the knowledge, tools, services, and resources needed for their children to thrive.



upWORDS
Parenting program focused on early language development for families with children 0 – 3 years of age

upWORDS^2
Parenting program focused on positive parenting, emotional regulation, and early brain development

upWORDS Bridges
Individualized support for families with a child with a language or development delay

Family Workshops
Community based education, skill building, and social connections for families

upLIFT
Individual support program for women with perinatal depression or anxiety

upLIFT Group
Virtual group-based program for women with maternal depression or anxiety

upREACH
Brief home visitation program for pregnant women and parents of infants focused on maternal and infant health

Nurse Family Partnership
Long-term home visitation program for first time mothers focused on health, positive parenting, and child development

Community Connections
Assistance with basic needs and connecting families to community resources

UP START

Community Connections

The goal of upSTART community connection is to reduce barriers that prevent caregivers from establishing safe, secure, and stable relationships with their young children. upSTART has completed over **2,900** screenings for basic needs.

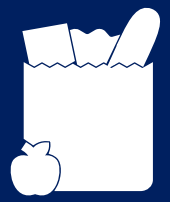
Community Connections

Resource Referral

Application Assistance

Direct Assistance

Community Connections



31% Food Insecure

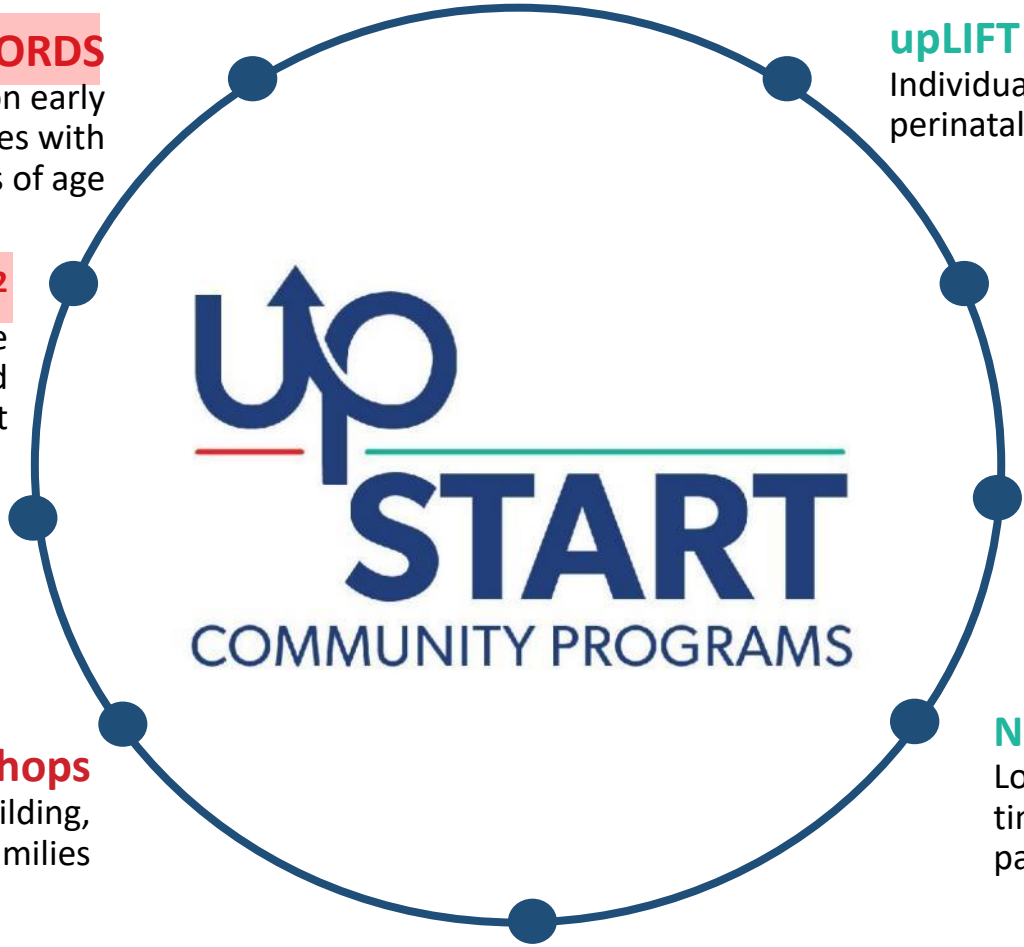
27% Housing Insecure

23% Health Insurance Needs

20% Unreliable Transportation

- 4,104 Referrals to Community Partners
- BCM Direct Assistance:
  715 Families/$138,000
  - Immediate food
  - Safe place for child to sleep
  - Infant items
  - Transportation
  - Utility bills

Universal Goal: All families with young children in the Greater Houston area have access to the knowledge, tools, services, and resources needed for their children to thrive.



upWORDS
Parenting program focused on early language development for families with children 0 – 3 years of age

upWORDS^2
Parenting program focused on positive parenting, emotional regulation, and early brain development

upWORDS Bridges
Individualized support for families with a child with a language or development delay

Family Workshops
Community based education, skill building, and social connections for families

upLIFT
Individual support program for women with perinatal depression or anxiety

upLIFT Group
Virtual group-based program for women with maternal depression or anxiety

upREACH
Brief home visitation program for pregnant women and parents of infants focused on maternal and infant health

Nurse Family Partnership
Long-term home visitation program for first time mothers focused on health, positive parenting, and child development

Community Connections
Assistance with basic needs and connecting families to community resources

UpSTART COMMUNITY PROGRAMS | UpLIFT UpWORDS UpREACH

Program Overview

The early years are a time of incredible brain growth, with **millions** of connections forming every **second. Positive interactions with parents are crucial, as early exposure to language is vital for development.** By talking, singing, and engaging with a child, caregivers lay the foundation for understanding speech patterns, vocabulary acquisition, and fluent communication. Launched in 2016, upWORDS is a group-based program for caregivers of children ages 0-36 months. It teaches simple, research-backed strategies to boost **early brain and language development.**

Program includes:

- 16 one-hour group sessions (inc. two individual meetings)
- Monthly language snapshots
- Use of a LENA "Language FitBit" device
- Weekly reports on talk, turn-taking, and electronic sound exposure

BY THE NUMBERS

82K+

OVER 82,000 BOOKS DISTRIBUTED

3044

CHILDREN SERVED

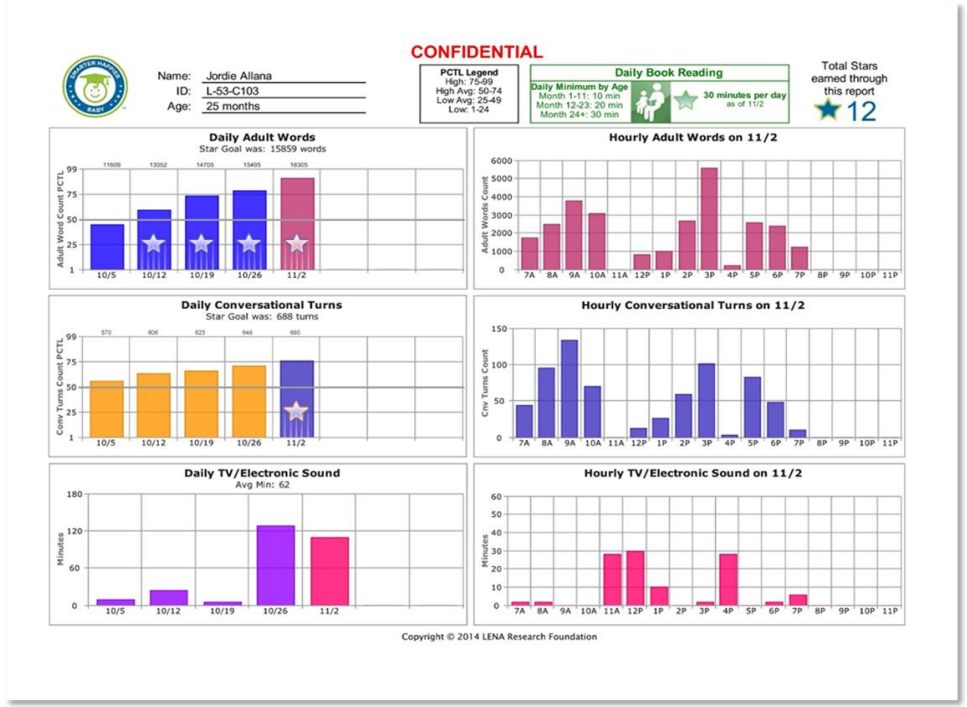
SERVED
45 TX COUNTIES
&
248 ZIP CODES

ASIAN: 9.1%
BLACK: 11.5%
HISPANIC: 60.9%
WHITE: 9%
OTHER: 9.5%

[No Title]

43%
Spanish Speaking

UpSTART



CONFIDENTIAL

Name: Jordie Allana
ID: L-53-C103
Age: 25 months

PCTL Legend
High: 75-99
High Avg: 50-74
Low Avg: 25-49
Low: 1-24

Daily Book Reading
Daily Minimum by Age
Month 1-11: 10 min
Month 12-23: 20 min
Month 24+: 30 min
30 minutes per day as of 11/2

Total Stars earned through this report
12

Daily Adult Words
Star Goal was: 15859 words

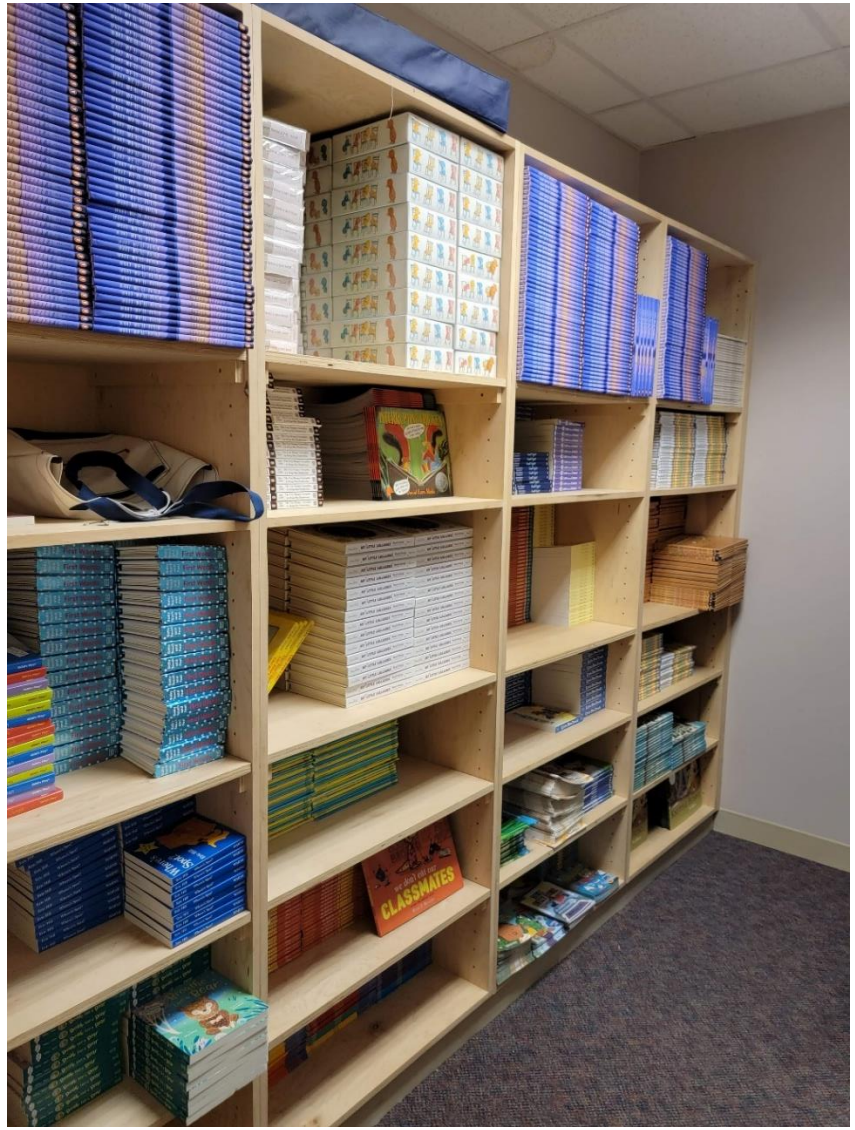
Hourly Adult Words on 11/2

Daily Conversational Turns
Star Goal was: 688 turns

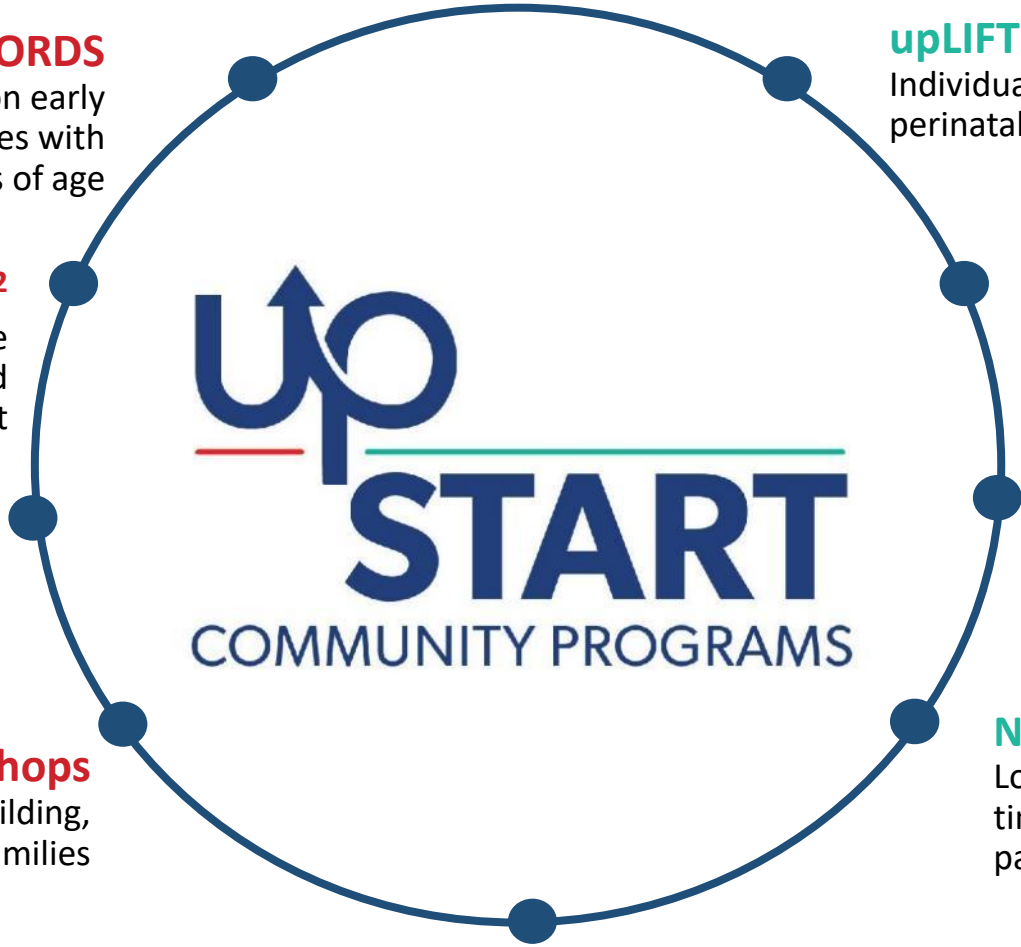
Hourly Conversational Turns on 11/2

Daily TV/Electronic Sound
Avg Min: 62

Hourly TV/Electronic Sound on 11/2



Universal Goal: All families with young children in the Greater Houston area have access to the knowledge, tools, services, and resources needed for their children to thrive.



upWORDS
Parenting program focused on early language development for families with children 0 – 3 years of age

upWORDS^2
Parenting program focused on positive parenting, emotional regulation, and early brain development

upWORDS Bridges
Individualized support for families with a child with a language or development delay

Family Workshops
Community based education, skill building, and social connections for families

upLIFT
Individual support program for women with perinatal depression or anxiety

upLIFT Group
Virtual group-based program for women with maternal depression or anxiety

upREACH
Brief home visitation program for pregnant women and parents of infants focused on maternal and infant health

Nurse Family Partnership
Long-term home visitation program for first time mothers focused on health, positive parenting, and child development

Community Connections
Assistance with basic needs and connecting families to community resources

upREACH Program Content

- Prioritizing Needs & Goal Setting
- Advocating for your health
- Healthcare partnerships
- Thinking ahead
- Maternal prenatal/postpartum health & wellness
- Preparing for and ensuring infant safety
- Infant brain development
- Infant health & feeding

UP START

upWORDS (upwords@texaschildrens.org)

Eligibility: Child 0-36 months of age
Enrollment: upWORDS@texaschildrens.org; www.texaschildrens.org/upwords-program
(832)227-1828

upWORDS^2

Eligibility: Current or past enrollment in upWORDS

upWORDS Bridges

Eligibility: Current or past enrollment in upWORDS

Family Workshops

Open to anyone. If you have interest please email me, mkdugan@texaschildrens.org to be informed of future workshops

upSTART COMMUNITY PROGRAMS

upLIFT (upliftformoms@bcm.edu)

Eligibility: Symptoms of perinatal depression or anxiety in pregnancy or up to the first year after childbirth that reside in Harris and surrounding counties
Enrollment: www.redcap.link/uplift

upLIFT Group (upliftformoms@bcm.edu)

Eligibility: Symptoms of maternal depression or anxiety in pregnancy or up until their child 5 years old that reside in Harris and surrounding counties
Enrollment: https://redcap.link/upliftgroup

upREACH (upreachprogram@bcm.edu)

Eligibility: Pregnant or less than 2 weeks post-partum that reside in Harris and surrounding counties
Enrollment: www.redcap.link/upREACH

Nurse Family Partnership (nursefamilypartnership@bcm.edu)

Eligibility: First time mom who is <28 weeks pregnant; low income or teen parent with social or medical concerns
Enrollment:
https://redcap.link/BCMNFP

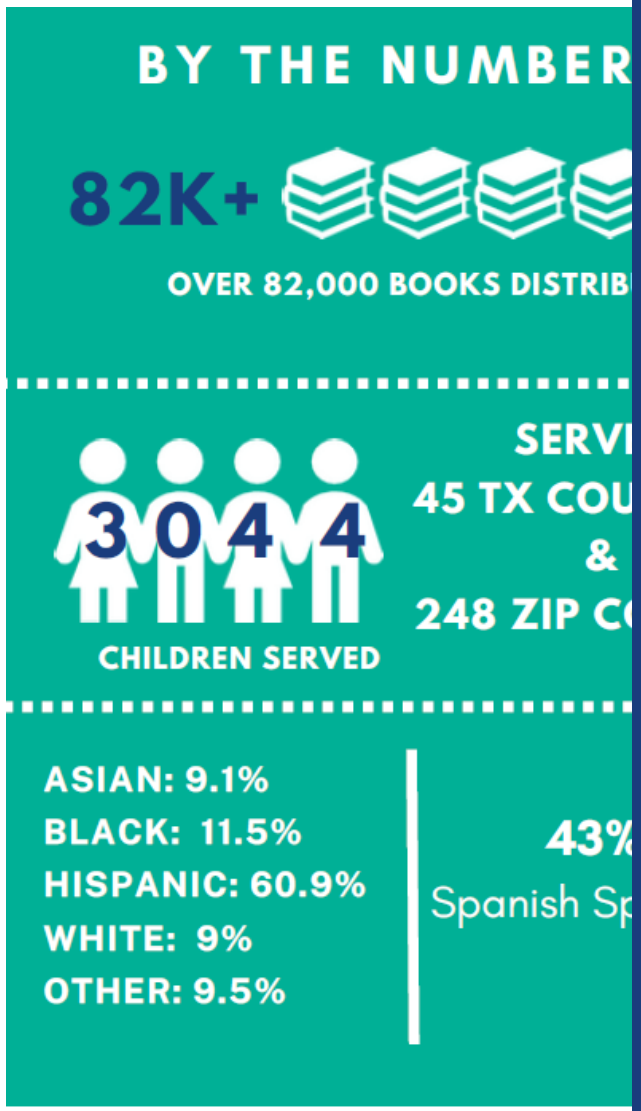
Community Connections

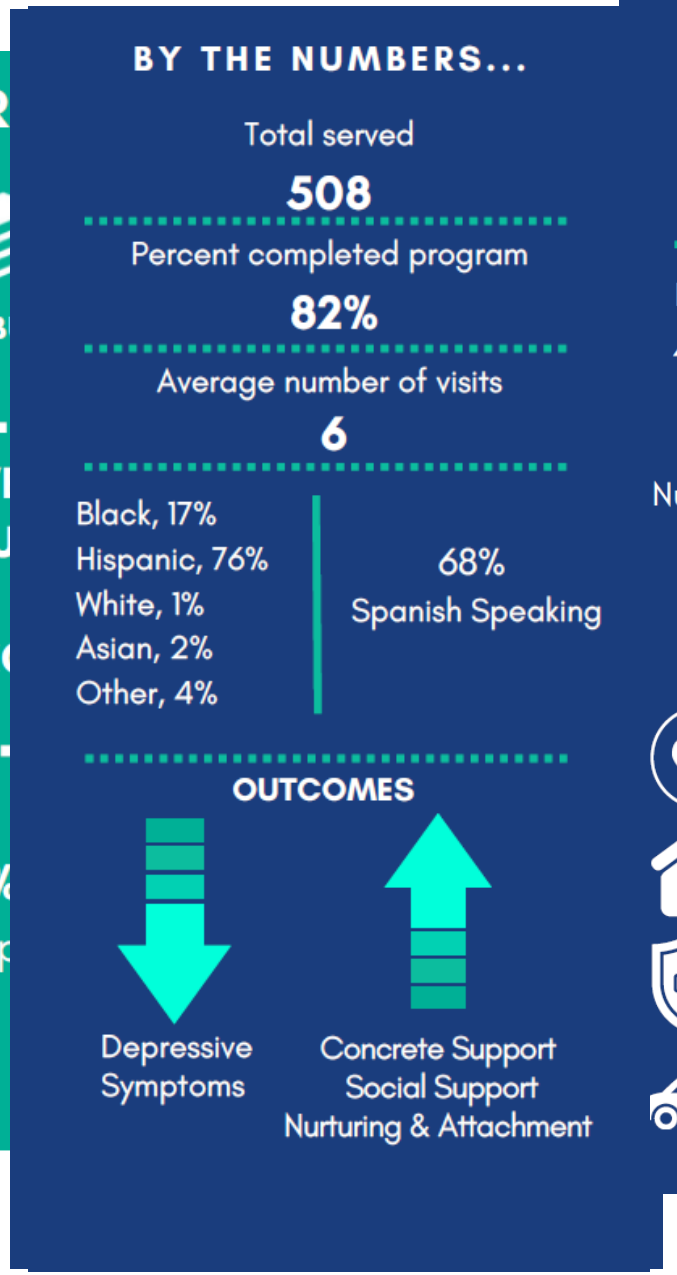
Eligibility: Enrollment in upSTART programs

Texas Children's Hospital®

If you'd like multiple program flyers, feel free to email mkdugan@texaschildrens.org

Official pediatric teaching hospital of Baylor College of Medicine


BY THE NUMBER
82K+
OVER 82,000 BOOKS DISTRIB
3044
CHILDREN SERVED
SERV
45 TX COU
&
248 ZIP C
ASIAN: 9.1%
BLACK: 11.5%
HISPANIC: 60.9%
WHITE: 9%
OTHER: 9.5%
43%
Spanish Sp


BY THE NUMBERS...
Total served
508
Percent completed program
82%
Average number of visits
6
Black, 17%
Hispanic, 76%
White, 1%
Asian, 2%
Other, 4%
68%
Spanish Speaking
OUTCOMES
Depressive Symptoms
Concrete Support
Social Support
Nurturing & Attachment


BY THE NUMBERS
Total Screenings for Basic Needs
2,934
Referrals to Community Programs
4,104 to 1,335 families
Number Receiving Direct Assistance
715
Family Needs
31% Food Insecure
27% Housing Insecure
23% Health Insurance Needs
20% Unreliable Transportation

2024 data

“When you hand good people possibility, they do great things"

THE TEAM:

Ursula Johnson, PhD

Beth Van Horne, DrPH

Lorena Diaz, LCSW

Michele Parker- Schauer, LCSW

Jennifer Delgado, LCSW

Lindsey Guiney, LMSW

Pamela Merhan, LCSW

Community Health Workers:

Santy Guel

Elizabeth Guzman

Monica Espinoza

Content Support:

Elisabeth Netherton, MD

Jessica Rohr, PhD

McClain Sampson, PhD

Ellen Feeley, LCSW-I

Texas Children’s Hospital®

UP START

UP LIFT

Official pediatric teaching hospital of Baylor College of Medicine

Christopher S. Greeley, MD, MS

Chief, Division of Public Health Pediatrics
Texas Children's Hospital
Professor of Pediatrics
Vice Chair for Community Health
Baylor College of Medicine

Greeley@bcm.edu
Greeley@texaschildrens.org

Continuing Education

Nursing CEUs

To receive nursing continuing professional development hours, complete the required online evaluation by scanning the QR code below.

Please download your certificate before exiting the evaluation.

Powered By QuestionPro

https://uthealth.questionpro.com/t/AXzzkZ7Yjf

CHES/MCHES® credit

You will receive an evaluation within one week following the webinar if you indicated upon registering that you would like to request CHES/MCHES® credit

UTHealth Houston School of Public Health

MICHAEL & SUSAN DELL CENTER for HEALTHY LIVING

Thank you for attending!

Scan the QR code below to register for upcoming ones!

Nourishing Beginnings: Fueling Healthy Futures in the First 1,000 Days of Life

Tue Nov 4
12 pm CT

https://go.uth.edu/first-1000-days-of-life

Navigating Holiday Meals: Culinary Strategies for Blood Sugar Control

Tue Nov 11
12 pm CT

https://go.uth.edu/holiday-meals-diabetes-awareness

UTHealth Houston School of Public Health

MICHAEL & SUSAN DELL CENTER for HEALTHY LIVING