



**Proponent Testimony- House Behavioral Health Committee  
HCR16 — Recognizing the Importance of Perinatal Mental Health  
May 21, 2024**

Chair Pavliga, Vice Chair White, Ranking Member Brewer and members of the House Behavioral Health Committee. Thank you for allowing me to provide proponent testimony on HCR16, recognizing the importance of perinatal mental health.

My name is Becca Alexander and I currently serve as Operations Director of Mental Health America of Ohio. For the last eleven years, I have also served in various positions in the field of perinatal mental health support - as a mental health peer recovery supporter, support group facilitator, and a manager of the POEM program. My primary work for the last 2 years has been the development and management of the Ohio Perinatal Mental Health Task Force, a statewide coalition of over 400 individuals and organizations dedicated to advancing perinatal mental health access to care and treatment.

This work, to me, is a personal mission. 11 years ago, just days after I delivered my first son, I began to experience a level of darkness, panic, and hypervigilance that I'd never experienced before in my life. I felt blindsided by this experience and its intensity, and I felt powerless to help myself and hopeless that I could be a mother to my child. During my pregnancy and after delivery, nobody ever talked to me about my mental health or inquired about how I was feeling.

What I could have known was that I was very high risk for a perinatal mental health complication, based on my family and health history. I could have known what perinatal mental health complications look like, and I could have known that what I was experiencing was treatable. I could have known that there were supports I could access for myself and for my partner to prepare for postpartum. I could have known how to reach out for help before I became desperate and unable to care for my own baby. I could have known, but I didn't. Instead, I walked a very thin line of personal safety, until I searched the internet for help. I found the POEM program. The program saved my life, and I now have two children – 8 and 11 years old. I am finally the mom I always wanted to be. But I'm one of the lucky ones.

Many of us who work in this field are women and birthing people with lived experience who became dedicated to providing the support and care that they needed and that many do not receive. 75% of perinatal mental health conditions go untreated, and some of the most prominent barriers to receiving treatment are lack of comprehensive screening, diagnosis, and referral to care. Stigma also remains one of the largest barriers – and until we begin having conversations with each other about perinatal mental health in our own communities, that stigma will continue to prevent moms

from reaching out for help. When our leaders and representatives help to facilitate that open dialogue, we create a safer and more hopeful conversation for everyone.

The Ohio Perinatal Mental Health Task Force creates more opportunity for these conversations in communities and systems. Our membership is a spectrum of individuals invested in this work – those with lived experience, healthcare professionals, families, birth workers, community organizations, social service agencies, policymakers, and others. Our members know that perinatal mental health is a key and sometimes overlooked factor in the maternal and infant health conversation, and it is our mission to ensure that systems continue to grow in their focus and capacity to provide better mental health services and support for moms.

Thank you again for allowing me to provide testimony on HCR16. I am happy to take any questions you may have at this time.

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