



2019 Maternal Mental Health Innovation Award

Award Category: Innovative Community Solutions

Program Objectives and Overview of Innovation: The mission of the Appalachian Perinatal Mental Health Alliance (APMHA) is to promote awareness, prevention, advocacy and treatment of perinatal and early parenting mental health issues in all communities. APMHA is a diverse group of regional organizations, professionals, advocates, and individuals who work as positive agents of change for mothers, healthcare providers, and community members in the Northeast Tennessee region and beyond.

Program Details, Key Personnel and Timeline: The Appalachian Perinatal Mental Health Alliance was co-founded by Dr. Diana Morelen, PhD, Dr. Matthew Tolliver, PhD, and Kristina Dulaney RN; see attached documentation for full credentials and additional board members. The alliance has three central aims: 1) to raise awareness of perinatal mental health in the region, 2) to decrease the stigma associated with perinatal mental health, and 3) to increase the capacity for our region to meet the needs of those with perinatal mental health concerns. To accomplish these aims we:

- Advocate for systematic screening of mothers antenatal and postnatal depression by OBGYN and pediatric practices in the region.
- Work to develop a comprehensive list of resources relevant to perinatal mental health in the region.
- Sponsor events to increase community knowledge of perinatal mental health concerns.
- Work to increase medical and mental health provider's knowledge, skills, and abilities to effectively address the needs of those with perinatal mental health concerns.
- Use individuals personal stories related to perinatal mental health to empower and educate our community.
- Provide a local, compassionate resource that can help coordinate currently disparate community efforts to address perinatal mental health concerns.

The timeline of the alliance is not finite, in that it can only reach its peak when every service within the region has been coordinated at a level that provides optimum level of care to women in the perinatal stage of health. The work will continue within the community until the awareness is raised to such a level that the women who need care are not without necessary resources. The work will continue until the stigma is reduced until those women will be supported in their desire to reach out for help.

Source of Initial and Sustained Funding and Support: The alliance started out with \$0 and a conversation. Since then it has sustained funding through community outreach programs and corporate sponsorships. The largest of which has been the Climb Out of Darkness Event. In June 2018 APMHA officially became a nonprofit under the TN chapter of the Postpartum Support International as the Appalachian Branch. The mission of

APMHA and the desire to promote wellness in women has provided for continued support and funding through community relationships and sponsorships.

Length of Time In Operation and Sustainability Plans: APMHA was originated out of a need to provide for collaboration among professionals and other organizations within the region to enhance their efforts to provide high quality care for mothers. It was chartered in May of 2016. It is a chapter of the Postpartum Support International TN, Appalachian branch. APMHA continues to be sustained by the input of board members who participate in the conversation while remaining active in the region they are serving. To maintain course APMHA will continue to engage the region by providing a local, compassionate resource that can help coordinate community efforts to address perinatal mental health concerns.

Summary of Results and Evidence of Impact: APMHA has participated in several events within the community to help bring awareness and education to the cause of perinatal mental health. The Appalachian Perinatal Mental Health Alliance:

- Participated in the Northeast Tennessee Maternal Health forum last August. This specifically brought over 50 professionals across the region together with national speakers to discuss maternal mental health.
- Obtained four proclamations for the Maternal Mental Health month of May including the State of Tennessee, City of Bristol, County of Washington, and City of Johnson City.
- Successfully scheduled and planned a Postpartum Support International (PSI) training in our area with 100 in attendance for a two day Perinatal Mood Disorder Components of Care training and 50 in attendance for and advanced training in Perinatal Mental Health Psychotherapy.
- Hosted our first Climb Out of The Darkness event in June 2018 that was featured by front page of a local paper
- Trained three Bloom certified peer support group facilitators and initiated a peer support group in January of 2019 that meets biweekly
- Have been invited to participate in the first dual state Accountable Care Community
- Have completed two community talks with OB-GYN Grand Rounds and Maternal Child Research Collaborative and are scheduled to talk with Pediatric Grand Round in September and Psychiatry Grand Rounds soon.
 - Because of the presentation with OBGYN Grand Rounds, a task force formed between the ETSU Pediatrics and ETSU OBGYN to improve screening practices and collaborative efforts.
 - ETSU Pediatrics contacted all new moms to notify them of the 1st annual community Climb Out of Darkness event in 2018.

Discussion of The Likelihood Others Could replicate Your Program:

The goal of the APMHA is to raise awareness, decrease stigma, and increase capacity of providers to meet needs regarding perinatal mental health. It is highly likely that another region would be able to congregate a group of professionals, advocates, and volunteers and partner with the organizations in their region to focus on providing high quality care for mothers. Research lays out the reasons why women are being underserved in the perinatal phase of health (see attached executive summary worksheet) and alliances among community members are needed on their behalf to make resources more readily available to them. That is what we aim to do at APMHA, and that is what we are willing and desire to help others construct.

Contact: Dr. Diana Morelen, PhD Co-Founder, Morelen@mail.ETSU.edu, (752) 218-7169



2019 Maternal Mental Health Innovation Award

Supporting Material



Appalachian
PERINATAL
MENTAL HEALTH
ALLIANCE

Appalachian Perinatal Mental Health Alliance (APMHA)

Executive Summary Worksheet

Problem:

Maternal depression and anxiety during and after pregnancy is incredibly common. Up to 85% of new mothers will experience the “baby blues” in the first two weeks after giving birth (Cohen et al., 2010) and between 10-20% will develop postpartum depression (Gaynes et al., 2005). Maternal depression can impact a mother’s attachment with her baby and her parenting style. Additionally, it can lead to an increased risk of adverse childhood experiences (Brummelte & Galea, 2016), and a range of negative health effects for the mother and baby (Kingston, Tough, & Whitfield, 2012; Morrison, McCook, & Bailey, 2016). Mothers who have low social support, a lack of financial and educational resources, live in rural areas, or use illicit drugs during pregnancy are at higher risk of developing postpartum depression (Brown, Goodin, & Talbert, 2018; Mollard, Brage Hudson, Ford, & Pullen, 2016; Wszolek et al., 2018). Many of these risk factors are present in our region in Northeast Tennessee.

Thankfully, there are evidence-based treatments for postpartum depression and anxiety, such as psychotherapy and certain medications. The earlier mothers access treatment, the less the likelihood for negative impacts on mother and baby (Essex, Klein, Cho, & Kalin, 2002). However, despite the effectiveness of these interventions, many women never access them due to stigma, low health literacy, and lack of availability (Koniak-Griffin, Logsdon, Hines-Martin, & Turner, 2006; National Institute for Health Care Management, 2010).

The U.S. Preventative Task force recommends that primary care providers screen and develop appropriate treatment pathways for postpartum depression (O'Connor et al., 2016). Yet some pediatricians do not feel that it is their role to screen mothers (Olson et al., 2002), and some mothers are uncomfortable discussing their mood with the pediatrician (Heneghan, Mercer, & DeLeone, 2004). Some evidence suggests that even OBGYNs have room for improvement in identifying and treatment depressed women (Goodman & Tyler-Viola, 2010).

In Northeast Tennessee, efforts are needed which raise awareness of perinatal mental health disorders, advocate for systemic screening of mothers in primary care, increase access to treatment pathways for mothers with mental health concerns, and combat stigma associated with mental illness.

Customer:

The Appalachian Perinatal Mental Health Alliance will work as a positive agent of change for mothers, healthcare providers, and community members in the Northeast Tennessee region and beyond.

Solution/Benefit/Message/Aims:

Our organization has three central aims:

- 1) to raise awareness of perinatal mental health in the region,
- 2) to decrease stigma associated with perinatal mental health, and
- 3) to increase the capacity for our region to meet the needs of those with perinatal mental health concerns.

To accomplish these aims we will:

- Advocate for systematic screening of mothers for antenatal and postnatal depression by OBGYN and pediatric practices in the region.
- Work to develop a comprehensive list of resources relevant to perinatal mental health in the region.
- Sponsor events to increase community knowledge of perinatal mental health concerns.

- Work to increase medical and mental health providers knowledge, skills, and abilities to effectively address the needs of those with perinatal mental health concerns.
- Use individual's personal stories related to perinatal mental health to empower and educate our community.
- Provide a local, compassionate resource that can help coordinate currently disparate community efforts to address perinatal mental health concerns.

Competition:

Several local organizations (e.g., Frontier Health, ETSU Pediatrics, State of Franklin OBGYN) are working to provide high quality care for mothers. The Alliance will work to partner with these organizations to enhance their efforts.

Distribution

Information relevant to the Alliance will be distributed via social media platforms, a website, networking with community leaders, and word of mouth.

Revenue:

Funds for the Alliance will be sought through donations, grants, and fundraisers.

References

- Brown, J. D., Goodin, A. J., & Talbert, J. C. (2018). Rural and Appalachian Disparities in Neonatal Abstinence Syndrome Incidence and Access to Opioid Abuse Treatment. *Journal of Rural Health, 34*(1), 6-13. doi:10.1111/jrh.12251
- Brummelte, S., & Galea, L. A. (2016). Postpartum depression: Etiology, treatment and consequences for maternal care. *Hormones and Behavior, 77*, 153-166. doi:10.1016/j.yhbeh.2015.08.008
- Cohen, L. S., Wang, B., Nonacs, R., Viguera, A. C., Lemon, E. L., & Freeman, M. P. (2010). Treatment of mood disorders during pregnancy and postpartum. *Psychiatric Clinics of North America, 33*(2), 273-293. doi:10.1016/j.psc.2010.02.001
- Essex, M. J., Klein, M. H., Cho, E., & Kalin, N. H. (2002). Maternal stress beginning in infancy may sensitize children to later stress exposure: effects on cortisol and behavior. *Biological Psychiatry, 52*(8), 776-784.
- Gaynes, B. N., Gavin, N., Meltzer-Brody, S., Lohr, K. N., Swinson, T., Gartlehner, G., . . . Miller, W. C. (2005). Perinatal depression: prevalence, screening accuracy, and screening outcomes. *Evid Rep Technol Assess (Summ)*(119), 1-8.
- Goodman, J. H., & Tyer-Viola, L. (2010). Detection, treatment, and referral of perinatal depression and anxiety by obstetrical providers. *J Womens Health (Larchmt), 19*(3), 477-490. doi:10.1089/jwh.2008.1352
- Heneghan, A. M., Mercer, M., & DeLeone, N. L. (2004). Will mothers discuss parenting stress and depressive symptoms with their child's pediatrician? *Pediatrics, 113*(3 Pt 1), 460-467.
- Kingston, D., Tough, S., & Whitfield, H. (2012). Prenatal and postpartum maternal psychological distress and infant development: a systematic review. *Child Psychiatry and Human Development, 43*(5), 683-714. doi:10.1007/s10578-012-0291-4
- Koniak-Griffin, D., Logsdon, M. C., Hines-Martin, V., & Turner, C. C. (2006). Contemporary mothering in a diverse society. *Journal of Obstetric, Gynecologic, and Neonatal Nursing, 35*(5), 671-678. doi:10.1111/j.1552-6909.2006.00089.x
- Mollard, E., Brage Hudson, D., Ford, A., & Pullen, C. (2016). An Integrative Review of Postpartum Depression in Rural U.S. Communities. *Archives of Psychiatric Nursing, 30*(3), 418-424. doi:10.1016/j.apnu.2015.12.003
- Morrison, C., McCook, J. G., & Bailey, B. A. (2016). First trimester depression scores predict development of gestational diabetes mellitus in pregnant rural Appalachian women. *Journal of Psychosomatic Obstetrics & Gynecology, 37*(1), 21-25. doi:10.3109/0167482X.2015.1106473
- National Institute for Health Care Management. (2010). *Identifying and Treating Maternal Depression: Strategies and Considerations for Health Plans*. Retrieved from https://www.nihcm.org/pdf/FINAL_MaternalDepression6-7.pdf
- O'Connor, E., Rossom, R. C., Henninger, M., Groom, H. C., Burda, B. U., Henderson, J. T., . . . Whitlock, E. P. (2016). U.S. Preventive Services Task Force Evidence Syntheses, formerly Systematic Evidence Reviews. In *Screening for Depression in Adults: An Updated Systematic Evidence Review for the U.S. Preventive Services Task Force*. Rockville (MD): Agency for Healthcare Research and Quality (US).
- Olson, A. L., Kemper, K. J., Kelleher, K. J., Hammond, C. S., Zuckerman, B. S., & Dietrich, A. J. (2002). Primary care pediatricians' roles and perceived responsibilities in the identification and management of maternal depression. *Pediatrics, 110*(6), 1169-1176.
- Wszolek, K., Żak, E., Żurawska, J., Olszewska, J., Pięta, B., & Bojar, I. (2018). Influence of socio-economic factors on emotional changes during the postnatal period. *Annals of Agricultural and Environmental Medicine, 25*(1), 41-45. doi:10.26444/aaem/74486

Appalachian Perinatal Mental Health Alliance Board and Volunteers

Board Members:	
Kristina Dulaney, RN	RN, Co-Founder, PPP Survivor, Cherished Mom Founder
Diana Morelen, PhD	Assistant Professor, Psychologist, ETSU, cofounder
Matthew Tolliver, PhD	Assistant Professor, Psychologist, Behavioral Health Specialist, ETSU Peds, cofounder
Maggie Wood	Executive Director, Step Ahead TriCities
Jody McCook, PhD, MSN, RN	Professor, ETSU
Jilian Reece	Director, Carter Co Drug Prevention Coalition
Angelee Murray	Director of Corporate and Comm Development, Watauga Recovery Centers
Nick Branham, MBA	AVP, Ballad Health
Rachel Adams	Families Free
Kathy Benedetto	Sr VP Children's services, Frontier Health
Casey Carringer	Director of Clinical Engagement, Ballad Health
Dr GAYATRI Jaishankar	Medical director, ETSU Peds
Ginger Oaks	LMSW, ETSU OBGYN
J Eliza Kiernan	LPC-MHSP, GracePointe Counseling
Rose Stephens	ETSU Student, masters
Katelyn Tatro	ETSU Student, masters
Sara Reed	IBCLC, Nursing Nook / Peer Group Facilitator
Sherri Hutchins	SOFHA OBGYN, Practice Manager
Jessi Rasknick	PTA, Ballad Health / Peer Group Facilitator
Mary McCormick	MD, HMG
Nyela Edwards	Certified Nurse Midwife, Seasons of Bristol
Racine Edwards Silva	OBGYN, MD - FACOG, ETSU OBGYN
Volunteers:	
Chelsey Bishop	
Jessica Livesay	
Heather Click	
Carmen Jones	
Nicole Gilly	
Gloria Dudney	
Talli Hunigan	
Doreen Lancaster	Ballad Resource Center
Janice Yeager	RN, Lactation



STATE OF TENNESSEE

PROCLAMATION

BY THE GOVERNOR

WHEREAS, over 80,000 babies are born in Tennessee each year and the maternal health and, more specifically, the mental health of women before, during, and after pregnancy is an issue of great concern to women and their families; and

WHEREAS, between 9 and 37 percent of new and expectant mothers are affected by Perinatal Depression and related mood disorders such as anxiety and psychosis, and they may experience associated symptoms, which are often overlooked and heavily stigmatized because new and expectant mothers suffering from a perinatal mood disorder often feel confused, ashamed, and isolated; and

WHEREAS, many at-risk women may not seek help because they are not informed about Perinatal Depression and related mood disorders as part of their health care, because there is a lack of knowledge and use of screening and assessment tools, and because they are unaware of treatment and community supportive services for Perinatal Depression and related mood disorders; and

WHEREAS, heightened awareness and increased education among all residents in Tennessee regarding the incidence of Perinatal Depression is critical; and

WHEREAS, Perinatal Depression and related mood disorders affect all categories of women and teenage girls regardless of their age, race, or income level; and they can have a profound impact on the family and significantly contribute to adverse developmental and behavioral outcomes and attachment disorders in the young children of affected women; and

WHEREAS, Perinatal Depression is highly treatable with therapeutic intervention such as medication, professional therapy and counseling, support groups and community support services including crisis hotlines;

NOW, THEREFORE, I, Bill Lee, Governor of the State of Tennessee, do hereby proclaim May 2019 as

Maternal Mental Health Month

in Tennessee and encourage all citizens to join me in this worthy observance.



IN WITNESS WHEREOF, I have hereunto set my hand and caused the official seal of the State of Tennessee to be affixed at Nashville on this twenty-second day of February, 2019.

Governor

Secretary of State



City of Johnson City Tennessee

Mayoral Proclamation

Whereas Maternal mental health is an issue of great concern to new moms, families, physicians and communities; and

Whereas many women are not adequately informed, screened or treated for perinatal mood and anxiety disorders due to misunderstanding of the disorder or lack of knowledge of where to receive care; and

Whereas perinatal mood and anxiety disorders affect up to 1 in 5 new or expectant mothers and their families and is believed to be one of the most common complications during and after pregnancy; and

Whereas heightened awareness and increased education of the incidence of PMADs is critical for our community; and

Whereas these disorders can affect women and teenage girls regardless of age, race, or income level contributing significantly to adverse development and behavioral outcomes and attachment disorders in young children; and

Whereas perinatal mood and anxiety disorders are highly treatable with therapeutic intervention, community based supportive services, and medication; and

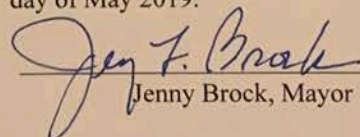
Whereas community support systems help facilitate a successful recovery.

Now, Therefore, I, Jenny Brock, Mayor of the City of Johnson City, Tennessee, do hereby proclaim the month of May 2019, as

MATERNAL MENTAL HEALTH AWARENESS MONTH



In Witness Whereof, I have hereunto set my hand and caused the Official Seal of the City of Johnson City, Tennessee, to be affixed this 2nd day of May 2019.


Jenny Brock, Mayor

Mayoral Proclamation

Whereas, over 1,500 babies are born in the City of Bristol each year and the maternal health and, more specifically, the mental health of women before, during, and after pregnancy is an issue of great concern to women and their families and is, therefore, of interest to the City of Bristol; and

Whereas, between 10 and 20 percent of new and expectant mothers are affected by Perinatal Depression and related mood disorders such as anxiety and psychosis, and they may experience associated symptoms, which are often overlooked and heavily stigmatized because new and expectant mothers suffering from a perinatal mood disorder often feels confused, ashamed, and isolated; and

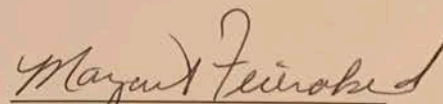
Whereas, many at-risk women may not seek help because they are not informed about Perinatal Depression and related mood disorder as part of their health care, because there is a lack of knowledge and use of screening and assessment tools, and because they are unaware of treatment and community supportive services for Perinatal Depression and related mood disorders; and

Whereas, heightened awareness and increased education among all residents in the City of Bristol regarding the incidence of Perinatal Depression is critical; and, Perinatal Depression is highly treatable with therapeutic intervention such as medication, professional therapy and counseling, support groups and community support services including crisis hotlines.

Now, therefore be it resolved that the month of May 2019 is declared throughout the City of Bristol, Tennessee, as

Maternal Mental Health Awareness Month.

Adopted this the 2nd day of April, 2019.


Margaret Feierabend, Mayor



Washington County
State of Tennessee

PROCLAMATION

Maternal Mental Health Month

WHEREAS, over 1,200 babies are born in the County of Washington each year and the maternal health and, more specifically, the mental health of women before, during, and after pregnancy is an issue of great concern to women and their families and is, therefore, of interest to the County of Washington; and

WHEREAS, between 10 and 20 percent of new and expectant mothers are affected by Perinatal Depression and related mood disorders such as anxiety and psychosis, and they may experience associated symptoms, which are often overlooked and heavily stigmatized because new and expectant mothers suffering from a perinatal mood disorder often feel confused, ashamed, and isolated; and

WHEREAS, many at-risk women may not seek help because they are not informed about Perinatal Depression and related mood disorders as part of their health care, because there is a lack of knowledge and use of screening and assessment tools, and because they are unaware of treatment and community supportive services for Perinatal Depression and related mood disorders; and

WHEREAS, heightened awareness and increased education among all residents in the County of Washington regarding the incidence of Perinatal Depression is critical; Perinatal Depression and related mood disorders affect all categories of women and teenage girls regardless of their age, race, or income level; Perinatal Depression can have a profound impact on the family and significantly contribute to adverse developmental and behavioral outcomes and attachment disorders in the young children of affected women; and Perinatal Depression is highly treatable with therapeutic intervention such as medication, professional therapy and counseling, support groups and community support services including crisis hotlines; now therefore.

BE IT RESOLVED, BY THE BOARD OF COUNTY COMMISSIONERS OF WASHINGTON COUNTY, TENNESSEE AND COUNTY MAYOR WILLIAM J. GRANDY, DO HEREBY PROCLAIM THAT EVERY MAY IS DECLARED:

Maternal Mental Health Awareness Month

throughout Washington County, Tennessee, whereas to encourage collaboration with local, state and/or national coalitions, organizations or agencies that are immensely informed on and devoted to this field of maternal mental health to facilitate increased awareness and education about Perinatal Depression and related mood disorders throughout the County, to explore and encourage the use of prenatal screening tools, and to improve the availability and access to effective treatment, prevention and support services for the promotion of maternal and infant mental health in the County of Washington.

ADOPTED BY THE COUNTY LEGISLATIVE BODY, in session duly assembled, on this the 22nd day of April, 2019.

IN WITNESS WHEREOF, I have hereunto set my hand and caused the seal of Washington County, Tennessee to be affixed in Jonesborough on this 22nd day of April, 2019.

William J. Grandy
WILLIAM J. GRANDY, COUNTY MAYOR





OBSTETRICS *and* GYNECOLOGY

Quillen ETSU Physicians

EAST TENNESSEE STATE UNIVERSITY

Dear 2020 Mom Innovation Awards Team,

It has been my pleasure to witness the work of the Appalachian Perinatal Mental Health Alliance. Their leadership team hosted a presentation at the ETSU OBGYN Grand Rounds in early April this year. They discussed perinatal mood and anxiety disorders and how to screen for them. They also gave us information on local and national resources to help patients with such disorders. The work that they are doing has been extremely helpful to us as healthcare providers as well as to our community. After their presentation, ETSU OB/GYN decided to initiate a postpartum task force to begin implementing some of those resources. This will allow for better communication and collaboration across several disciplines to provide our patients with the best support and care in our region.

Prior to the initiation of the Appalachian Perinatal Mental Health Alliance, we had little to no resources for moms struggling with perinatal mood and anxiety disorders. Now, we have a peer support group, a trained therapist, and other professionals that can assist our moms in our area. I'm certain that this is just the beginning for the Alliance, and we will soon have even more resources to provide excellent care in our region surrounding this topic.

Thank you for your consideration,

Ginger Carter, M.D./lpo

Ginger Carter, MD
ETSU OB/GYN
Associate Professor
Clinical Care Coordinator

General OB/GYN
Maternal/Fetal Medicine
325 North State of Franklin Road
Johnson City, TN 37604
P 423-439-7272 | F 423-439-7235

Fertility & Women's Services
Female Pelvic Medicine and Reconstructive Surgery
1319 Sunset Drive, Suite 103
Johnson City, TN, 37601
P 423-439-7246 | F 423-282-4698

General OB/GYN
1505 West Elk Avenue
Suite 1
 Elizabethton, TN 37643
P 423-543-7919 | F 423-543-5323

www.etsuphysicians.com

Johnson City Press

TRI-CITIES, TENNESSEE | johnsoncitypress.com

SUNDAY, JUNE 24, 2018 | \$1.50

'So this is about sales tax collection, but it's also about equality and support of those people who have businesses in our community.'

PETE PETERSON, city manager

Sales tax ruling draws applause for boost to budgets, business

By Zach Vance
PRESS STAFF WRITER
zvance@johnsoncitypress.com

The U.S. Supreme Court's monumental ruling Thursday saying states can collect sales tax from all online retailers, regardless of the retailer's physical presence yielded a general consensus among state and local officials:

Local officials: Supreme Court move levels playing field between online, brick-and-mortar retailers

"This will level the playing field between online sellers and brick-and-mortar stores," was



THE ASSOCIATED PRESS

the phrase echoed by five state and local officials.

regulation of the online sales tax might prove tortuous, the Supreme Court ruling could increase state and local government revenues across the country — especially in states like Tennessee that have no income tax and relies heavily on sales tax revenue. In 2015, 72.5 percent of Tennessee's total tax

See **APPLAUSE**, Page A2

FARM FRESH TENNESSEE TOUR

Tour's goal? Growing knowledge

Visitors get a closeup look at where their food grows; and then, there's that unusual 'Frankenstein' tree ...

By Hannah Swartz
PRESS STAFF WRITER
hswartz@johnsoncitypress.com

Local growers opened their farms to the public Saturday for the Farm Fresh Tennessee tours, giving members of the public a look at where their food comes from when they buy local.

"We like for everybody to understand where their food comes from, and the fact that you can buy this local, and buying local not only benefits the local farmer but ... also benefits the environment," local farmer Steven Stanley said.

Stanley and his family live on their six-acre farm in Johnson City where they raise unique varieties of fruits, vegetables and livestock.

On their farm, A Different

See **GROWING**, Page A2



HANNAH SWARTZ/JOHNSON CITY PRESS

The Stanleys live on their 6-acre A Different Chick Farm & Orchard in Johnson City, where they raise unique varieties of fruits, vegetables and livestock.

Farm facts:
• Five farms were on the Tennessee tour
• Next week's Virginia tour includes a winery and zipacos
• Visit arc02.org for more

March shines light on dealing with birth-related mental health issues

'Locally, we don't have much for moms.'
KRISTINA DELANEY

By Jessica Fuller
PRESS STAFF WRITER
jfuller@johnsoncitypress.com

For the band of survivors and supporters gathered at Winged Deer Park Saturday morning, the march by the lake was much more than just a stroll in the park.

It signified the struggle that as

many 20 percent of women will face while pregnant or after giving birth.

Climb Out of the Darkness, an international initiative focused on bringing awareness of maternal mental illness, is set on or near the longest day of the

See **LIGHT**, Page A2



Kristina Delaney leads the "climb," a symbolic walk for the inaugural "Climb Out of the Darkness" event, which aims to shed more light on mental health issues many women face after giving birth.

JESSICA FULLER/JOHNSON CITY PRESS

HIDDEN HEROES



BECKY CAMPBELL/JOHNSON CITY PRESS

Deo Hollis, who served two deployments in Iraq before a training injury, sits with his wife, Erin.

To injured veteran, wife is the true hero

Erin Hollis' mission is helping husband heal from debilitating injuries

EDITOR'S NOTE: This story is the first in a series dedicated to highlighting caregivers and the veterans they serve. Look for more in upcoming editions of the Johnson City Press.

By Becky Campbell
PRESS SENIOR REPORTER
bcampbell@johnsoncitypress.com

When Erin Hollis and her husband, Deo, met online five years ago, they had an immediate connection that led to marriage within six months.

Little did either know that six months after they married, their military life would begin to crumble.

Erin calls Deo her hero because of the sacrifices he made to serve his country. But Deo says Erin is the hero, for all the care she's given him since a debilitating injury during training.

A national nonprofit organization called Hidden Heroes recently established a local chapter for the Tri-Cities to recognize the sacrifices military veteran caregivers like Erin make on a daily basis.

The nonprofit foundation's goals are to:

- Raise awareness of the issues military caregivers confront every day.

- Inspire individuals, businesses, communities and civic, faith and government leaders to take action to support military caregivers in their communities.

- Establish a national registry, encouraging military caregivers to register at HiddenHeroes.org to better connect them to helpful resources and support.

"HiddenHeroes.org is the premier online destination for mili-

See **HERO**, Page A2



Appalachian PERINATAL MENTAL HEALTH ALLIANCE

@tnpmha

Adjusting to motherhood can be difficult. If you are pregnant or have recently had a baby and are experiencing any of these symptoms, WE UNDERSTAND. You are not alone.

...IF YOU FEEL ANXIOUS

...IF YOU FEEL HOPELESS

...IF YOU ARE UNABLE TO CONTROL YOUR MOOD

...IF YOU FEEL PHYSICALLY/EMOTIONALLY EXHAUSTED



Cherished Mom Perinatal Support Group

For more information call (423) 491-5076

Johnson City Public Library

100 W Millard Street

Johnson City, TN 37604

6:00 PM

2ND & 4TH MONDAY OF THE MONTH

support@cherishedmom.org - www.cherishedmom.org

FACILITATORS HAVE
BEEN TRAINED BY:



BLOOM
FOUNDATION



Johnson City is Climbing!

Climb Out of the Darkness is the largest international event for perinatal mood and anxiety disorders. Together we are building community, raising money and awareness to support the mental health of all new families. Operated by Postpartum Support International.

Join us!



June 22, 2019



Carver Park
322 W Watauga Ave



9:00 am - 12:00 pm

R.S.V.P. www.cherishedmom.org/cotd



stephensra@etsu.edu



www.cherishedmom.org/climb

All funds raised by participants and sponsors of Team Johnson City will go to benefit the Appalachian Perinatal Mental Health Alliance. The Appalachian Perinatal Mental Health Alliance supports the mental health of new families through training and education, peer support, and awareness endeavors. The Appalachian Perinatal Mental Health Alliance is a subsidiary nonprofit of Postpartum Support International.

You are not alone. You are not to blame. With help, you will be well.



www.postpartum.net

If you or someone you know is suffering PSI can help:

Call: 1.800.994.4773 or Text: 503.894.9453