



Bridging Gaps for Career-Driven Birthing Caregivers

A Case Study of Caroline





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AT A GLANCE

CHALLENGES

- Inadequate Mental Health Screening
- Limited Partner Inclusion
- Lack of Workplace Support
- Social Isolation as a Working Parent

RECOMMENDATIONS

- Employer-driven initiatives,
- Expanded parental leave,
- Holistic postpartum support that addresses the realities of working parents, both birthing and non-birthing

ABOUT THE STUDY

This research is based on in-depth interviews with 17 caregivers across the U.S. who experienced perinatal mood and anxiety disorders.

The Career-Driven Caregiver

Caroline faced significant challenges navigating postpartum mental health care while balancing a high-pressure career that she loved. Her experience highlights the need for employer-driven initiatives, expanded parental leave, and holistic postpartum support that addresses the realities of working parents, birthing and non-birthing.

Caroline participated in our recent study on perinatal mental health and brought a wealth of insight into the experiences of caregivers who are also students. With her permission, we highlight her story.

As an experienced professional, Caroline was used to managing multiple responsibilities. However, the transition to motherhood disrupted her sense of control in ways she hadn't anticipated. Her postpartum experience was marked by isolation, inadequate medical support, and the challenge of balancing work with new caregiving responsibilities.

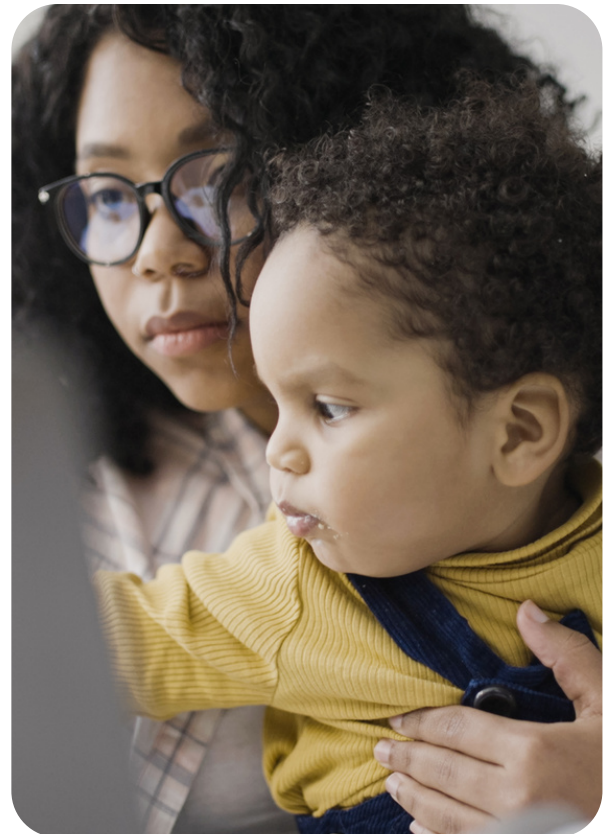
“The expectation was you just figure it out, and if you struggle, then you’re not as committed to your work.”

Caroline six-week postpartum checkup felt rushed and impersonal. **“It was very clinical,”** she recalls. **“I don’t remember any meaningful conversation or questions about my mental health.”** The visit failed to provide proactive guidance on postpartum anxiety, a condition Caroline would later struggle to identify on her own.

Initially, she dismissed her symptoms as normal adjustment stress. Until her best friend, a medical professional, noticed warning signs: **“I was overwhelmed and didn’t know how to articulate what I was feeling,”** Caroline explains. With limited parental leave, her husband returned to work quickly, leaving her to navigate the postpartum period with little structured support.

Determined to find help, Caroline sought therapy but encountered additional barriers. Her previous therapist, familiar with her prepartum concerns, dismissed her worries about returning to work. **“I needed someone who understood the complexities of being a working mom,”** she says. This led her to find a new provider who specialized in postpartum mental health and career transitions.

With their guidance, Caroline began medication management. However, the support she needed wasn’t just clinical. It was structural. Returning to work while managing postpartum anxiety felt overwhelming. **“I didn’t feel like I fit in at mommy-and-me classes,”** she shares. Without accessible, non-judgmental spaces for working parents, she relied on online communities and close friends for support.



“If we talk about PMADs more openly, more parents will feel empowered to seek help.”

Supports & Gaps

Caroline reported that she was able to utilize the following supports during the perinatal period:

- Therapy and medication
- Peer support

Research shows that peer support and tailored mental health interventions significantly improve postpartum well-being (Dennis & Letourneau, 2022). However, Caroline believes that earlier intervention and structured support groups for working parents could have eased her transition.

Further, non-judgmental workplace re-entry attitudes and policies are necessary. Unfortunately, Caroline encountered comparison and misattribution when she shared her perinatal concerns with her boss,

“When I was pregnant, my boss came to me and said I wasn’t requesting my time off in the way she wanted. She told me, ‘My OB’s office let me schedule all of my appointments at my eight-week checkup, why can’t yours?’”

Caroline’s experience also underscores the need to integrate partners into postpartum care. Her husband, who attended most prenatal visits, was excluded from postpartum mental health discussions. As she shared,

“He was struggling too, but no one thought to check in on him”



Future Directions

Caroline is one of a growing majority of birthing caregivers who have established careers. The desire to become a caregiver should not mean having to sacrifice career commitments. Returning to work while navigating postpartum recovery can exacerbate mental health struggles, especially in environments lacking clear support systems. The onus should also not fall only on birthing caregivers to advocate for workplace accommodations and supports.

Employers should consider initiating: postpartum leave policies, employee assistance programs that include perinatal mental health support, and proactive workplace check-ins for employees returning from parental leave, as well as for their non-birthing partners.

Dedicating more funding to support career-driven caregivers could lead to:

- Improved parental well-being,
- Improved workforce well-being and retainment
- Better work-life balance,
- Stronger family relationships and child resilience

“Institutions should proactively reach out to employees returning from parental leave to offer available resources.”

The Bottom Line

Caroline’s advocacy calls for systemic changes in healthcare and workplace culture to ensure all working parents receive the support they need.

References:

Paulson, J. F., & Bazemore, S. D. (2010). Prenatal and postpartum depression in fathers and its association with maternal depression: a meta-analysis. *Jama*, 303(19), 1961-1969.

About Nested

At Nested, we're committed to advancing family well-being through rigorous, impactful research. As a specialized 501(c)(3) nonprofit institute with deep expertise in child development, perinatal mental health, and parenting, **we are accelerating the research-to-action pipeline.**

Methodology

This case study is part of *Missed Screenings, Missed Support*, a national study on perinatal mental health. As part of the research, we conducted one-on-one interviews with caregivers across the United States, each lasting up to two hours. These conversations explored their personal experiences with perinatal mood and anxiety disorders, capturing the challenges, support systems, and moments that shaped their journeys.

All names used in this case study are pseudonyms. Any identifying information has also been changed to protect caregiver privacy.



This study was made possible by the generous support of our founding partners, who share our commitment to improving family well-being.

