Bridging Gaps in Perinatal Care for Military Mothers

A Case Study of Lisa

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AT A GLANCE

CHALLENGES

- Geographic isolation and frequent relocations
- Overburdened systems
- Limited spousal leave
- Mental health stigma
- Lack of practical supports

RECOMMENDATIONS

- Expand mental health services for trauma-informed therapy and train staff to offer compassionate care
- Provide flexible, on-base childcare and family-friendly spaces
- Extend parental leave for active-duty members
- Establish consistent resources for families across bases

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.

"Thank you for your service..."

This phrase doesn't quite seem to cut it for the families of active duty military personnel. The sacrifices involved in military service are extraordinary; as an expectant caregiver, 'service' and 'sacrifice' take on a whole new meaning.

Lisa participated in our recent study on perinatal mental health and brought a wealth of insight into the experiences of active duty caregivers. With her permission, we highlight her story.

The Resilient Advocate

Lisa, a 32-year-old mother of three, has navigated the complex intersections of military life, motherhood, and mental health. Married to an active-duty Navy Special Forces officer, Lisa's story reflects both the unique challenges and overlooked resilience of military spouses during the perinatal period.

Back-to-back pregnancies, including a traumatic preterm delivery of twins followed by a natural conception during a global pandemic, placed immense strain on Lisa's mental and physical health. Her twins arrived at 29 weeks, leading to an extended NICU stay. ***"I was bouncing between two babies in different parts of the NICU,"*** *Lisa recalls.* ***"My husband only got two weeks of paternity leave, so I was mostly alone."***

When her youngest daughter was born full-term, complications arose. Lisa became septic and spent three days in the ICU, separated from her newborn. ***"I thought I was going to die alone,"*** she recounts, highlighting the deficiencies of the military hospital system. Her trauma was compounded by minimal postpartum support and her husband's subsequent deployments, leaving her to care for three children under five by herself. During such dire circumstances, what supports were available to safeguard her mental and physical health?

Supports & Gaps

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

- The military base's mental health services
- Gym facilities with child-friendly spaces
- Informal (long-distance) family support during her husband's deployments

However, much was left to be desired.

Lisa accessed therapy through the Family Center but found services insufficient. ***"The therapists are overworked. One told me, 'You have three kids under five? Girl, what were you thinking?'"*** Such dismissive attitudes exemplify the systemic gaps in care. Research backs her experiences: military spouses face heightened risks of perinatal depression, anxiety, and PTSD, often worsened by geographic isolation and inconsistent resources.

Frequent relocations and deployments place extraordinary stress on families. This adds extra stress during the perinatal period. ***"The command will say, oh, we support you in all the military spouse appreciation months. It's just talk,"*** Lisa said.

"If you actually appreciated us, you'd staff hospitals and provide child care that works."

Lisa spoke candidly about the unspoken realities of early motherhood. ***"Even when you're in it, grieving the way that your life used to be before kids. That's something I was never told about either,"*** she reflects. ***"I just want to sleep in and not be screamed at first thing in the morning."*** This raw honesty underscores the need for more open conversations around parental mental health and societal expectations, especially for those already sacrificing so much for their country.

Future Directions

Lisa's story illustrates that while the resilience of military families is remarkable, systemic improvements are crucial to ensure their sustainability. Lisa's experiences also align with findings from a 2024 scoping review on military spouses' mental health by Pretorius et al., which identified significant gaps in screening and resource availability. Improved services, such as trauma-informed therapy, flexible child care options, and comprehensive spousal support programs, could transform outcomes for families like hers. Research also indicates that the return on investment for organizations is high.

Dedicating more funding for mental health providers, spousal support iniatives, and accessible child care and facilities could:

- **Reduce attrition among active-duty personnel (50% lower with adequate spousal support)**
- **Improve workforce morale**
- **Enhance long-term family well-being and child developmental outcomes**

Lisa's resilience fuels her desire to bring awareness to these issues. ***"I'm happy to help in any way to bring light to this time period for all women, regardless of military or not,"*** she emphasizes. ***"If there's anything we could do to possibly bring more light to that, more resources, I'm all on board for that."*** Her journey is a call to action for organizations and policymakers to bridge the gaps in maternal and spousal care systems.

The Bottom Line

By investing in comprehensive support systems, we not only honor their sacrifices but create a healthier, more stable future for all.

References:

Pretorius, K., Sposato, M. F., & Trueblood-Miller, W. (2024). Perinatal mental health and active-duty military spouses: A scoping review. BMC Pregnancy and Childbirth, 24(1), Article 557.

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.

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