



# Navigating Postpartum Without a Village

A Case Study of Keiko









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## AT A GLANCE

#### **CHALLENGES**

- Isolation in a hyperindependent, capitalist society
- Lack of culturally competent care providers

#### RECOMMENDATIONS

- Provide more affordable mental health resources
- Ensure that care providers are culturally competent
- Promote a 'village' mindset, with collective care and accessible support networks

#### 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.

## Keiko's Story

Keiko, a first-time mother and immigrant from Japan, faced significant challenges navigating postpartum mental health support in the U.S. Her story reveals the complexities of cultural adaptation, the limitations of healthcare recommendations, and the critical need for community-based postpartum care.

Keiko 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.

"I realized I had no village. I tried looking online, and I found these mom groups, but they cost \$300 a month. I thought, 'I have to pay just to make a friend?' I had to take the initiative to build my own village."

Keiko struggled with postpartum depression for nearly a year without recognizing it. "I didn't know I had postpartum depression until much later," she shares, "Doctors didn't catch it. That's the issue. It just showed up as anger, as frustration... nobody really pointed out that maybe you have depression." Unfortunately, healthcare providers failed to recognize or address her concerns effectively. "The doctors just handed me a list of resources without understanding their accessibility or affordability," she recalls.

A major hurdle for Keiko was the lack of accessible mental health services. "They recommended an exclusive motherhood center," she says. "But when I checked, it cost \$400 per session and didn't even take my insurance." This experience left Keiko feeling isolated and disillusioned with the healthcare system. Her search for affordable and culturally sensitive care led her to explore community support instead.

Determined to find the support she needed, Keiko reached out to her cultural roots. Despite past struggles with community connections, she found solace in Japanese mothers' groups that embraced traditional values of collective child-rearing.



"In Japan, there's a sense of shared responsibility for raising children. It took time, but I found people who understood and supported me."

## **Supports & Gaps**

Keiko's experience underscores the importance of culturally relevant mental health support. Studies confirm that immigrant mothers are at a higher risk for postpartum depression due to social isolation, cultural barriers, and unfamiliarity with available resources (Fellmeth et al., 2021). By reconnecting with her cultural community, Keiko was able to access informal peer support, which helped alleviate feelings of isolation and anxiety.

Keiko's case highlights also systemic gaps in postpartum mental health support, particularly for immigrant and low-income populations. As a freelancer, Keiko had the flexibility to manage her schedule but lacked workplace-provided benefits, such as paid parental leave or mental health support. Her journey emphasizes the need for healthcare providers to better understand and tailor resources to the needs of diverse communities. "They just handed me a list of resources without understanding if they were accessible or affordable," she recalls. She advocates for broader inclusion of freelancers and gig workers in maternal health initiatives, emphasizing that flexible but comprehensive support systems are crucial for new parents in non-traditional work roles. "New mothers need more than just medical care. They need a community," Keiko asserts.

"The system assumes we have the financial means and social networks to support us, but that's not the reality"



### **Future Directions**

Lastly, care workers must take a trauma-informed approach, especially when working with immigrant communities, to ensure accuracy while avoiding any harm.

As Keiko recalls, "A social worker came just a few hours after I gave birth and started asking me about past traumas. 'Have you ever been abused? Have you ever had a sexual trauma?' I had just met my baby, I was physically and mentally vulnerable, and they were digging into my past like that." This startled and disturbed her at such a sensitive time. "It was so intrusive, so unnecessary. And then she just left. No follow-up, no support, just 'I have to go now, okay bye."

"In Japan, the city, the village, the town... they take responsibility for child care. There are public programs, spaces for mothers to gather, and actual support systems.

Here in the U.S., it's the opposite. You're expected to pay for everything.

Everything is so commercialized."

Dedicating more funding to immigrant caregivers in the United States could:

- Improve caregiver well-being and community cohesiveness
- Reduce healthcare costs
- Foster interdependence as a cultural norm

## **The Bottom Line**

Keiko's advocacy sheds light on the critical importance of building postpartum care models that prioritize both mental health and cultural inclusivity.

By investing in comprehensive support systems for immigrant caregivers, we can support positive adaptation and holistic wellness.

#### References:

Fellmeth, G., Fazel, M., & Plugge, E. (2021). Migration and perinatal mental health in women from low- and middle-income countries: A systematic review and meta-analysis. BMJ Global Health, 6(1), e004793. https://doi.org/10.1136/bmjgh-2020-004793

Misri, S., Kendrick, K., Oberlander, T., & Carter, D. (2020). The impact of cultural competence in postpartum mental healthcare: A review of patient-centered approaches. Journal of Perinatal Medicine, 48(5), 513-520. https://doi.org/10.1515/jpm-2020-0345

#### **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.



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