



Perinatal Day Program

IOP Newsletter- September 2026

WHO WE TREAT

- Pregnant or postpartum (up to 18 months) with new or worsening mood/anxiety symptoms.
- Need more support than weekly therapy, and/or daily functioning or bonding are impacted.
- Require structured, frequent care (not inpatient).
- Non-mobile babies welcome!

PROGRAM HIGHLIGHTS

- **Dr. Molly Chodakewitz, MD and Kate Fagan, LCSW, PMH-C will be presenting at HHC's Inaugural PMAD Conference on Saturday, September 19th 8am-12:30pm @ HOCC!**
- **Baby Support Volunteers Needed!**
- **We are available to join staff huddles or business meetings to share an overview of our program and/or provide brief education on PMADs. Contact us for more information.**

PSYCHOEDUCATION CORNER

SUICIDE PREVENTION IN THE PERINATAL PERIOD

September is Suicide Prevention Month

- **Did you know?** Suicide is a leading cause of maternal death during pregnancy and the first year postpartum, approximately 20% of perinatal maternal deaths.
- Early recognition and treatment of mental health concerns can save lives.

Common Risk Factors:

- History of mental illness or previous suicide attempts
- Postpartum psychiatric hospitalization
- Trauma, abuse, or intimate partner violence
- Depression, anxiety, or substance use
- Grief, isolation, family conflict, or limited support
- Unplanned pregnancy or significant life stressors
- **Most maternal suicides occur between 6 and 12 months postpartum**

Warning Signs:

- Persistent sadness, hopelessness, or severe anxiety
- Feeling disconnected from baby or loved ones
- Intense guilt, shame, or worthlessness
- Changes in sleep, appetite, or daily functioning
- Withdrawal from support systems
- Thoughts of self-harm or suicide
- For more information about suicide risk with perinatal patients: [click here](#).
- [Click here](#) to learn about coping skills for at risk new and expectant parents.

QUOTE OF THE MONTH

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

REFERRAL TIPS

● URGENT – IMMEDIATE ACTION

- SI / HI
- Harm to baby + intent
- Psychosis (delusions, paranoia, confusion)
- Can't care for self/baby
- Mania (↓ sleep, erratic behavior)
- 👉 ED / same-day evaluation

● HIGH RISK – REFER NOW

- Moderate-severe screening score
- Intrusive thoughts (distressing)
- Panic, severe anxiety
- Not bonding with baby
- Persistent guilt / hopelessness
- Rage / severe irritability
- Not improving with outpatient care

👉 Refer to perinatal MH (IOP)

● MONITOR CLOSELY

- "Baby blues" > 2 weeks
- Tearful, overwhelmed
- Avoidance / withdrawal
- Poor sleep even when baby sleeps

👉 Re-screen + consider referral

HOW TO REFER

- Providers or client's can self-refer.
- Internal referrals submit an **EPIC ORDER Ref222 for INST PSYPERI** and complete redcap [referral form](#). Type 'IOP' in Comment Section

[CLICK HERE TO REFER A CLIENT](#)

RESOURCES

- Postpartum Support International (PSI): www.postpartum.net
- PSI CT: psictchapter.com
- National Maternal Mental Health Hotline: **1-833-TLC-MAMA (1-833-852-6262)**
- 988 Suicide & Crisis Lifeline: 988lifeline.org
- Talk It Out CT – Parent support line: **833-258-5011**
- CTSafeConnect.org– IPV hotline: **888-774-2900**

CONTACT US

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Perinatal Day Program

The Perinatal Day Program at the Institute of Living is a group therapy-based Intensive Outpatient Program (IOP). It provides a therapeutic and nurturing environment tailored to mothers and birthing parents who are pregnant or postpartum and struggling with their mental health, bonding with their baby, maintaining relationships, and managing demands of daily life.

Overview

- The program operates 3 days per week; each program day includes 3 hours of group therapy
- Patients are encouraged to bring their infants to program
- Treatment is offered in-person only
- On-site parent-baby room for babies up to 1 year old or until mobile

Our approach

We recognize that the perinatal period is an especially intense and vulnerable time. Our program is designed to support the parent-child relationship by creating a space where caregivers and their babies can be together during treatment.

Our multi-disciplinary team are experts in perinatal mental health and reproductive psychiatry. We work closely with each parent to address current challenges and symptoms — empowering them to attend to their own emotional and physical needs while caring for their babies.



What we offer

Group therapy that focuses on the perinatal period and its impact, mood and anxiety disorders, relationship changes, and parenting struggles.

- Communication
- Self-care
- Parenting strategies
- Managing intrusive thoughts or worries
- Ways to bond and care for your baby
- Specialized groups, such as infant feeding, sleep and nutrition, consultations with a doula/midwife, and perinatal yoga/pilates

Additional services include:

- Medication management
- Family or couples sessions
- Care coordination

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InstituteofLiving.org/programs-services/perinatal-day-program

