



HELPING OUR PREGNANT AND PARENTING STUDENTS BEAT THE ODDS!

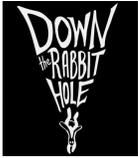
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Outline

- Facts and Figures-underserved and at-risk group
- Mental Health During Pregnancy and Post-Pregnancy
- Needed Services and Policies
- Best Practices/Model Schools
- Title IV Implications
- Q & A




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My Inspiration...



Becoming a mother has opened my eyes to the challenges that our pregnant and parenting students must face



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My Office Space



- 1 Chair without arms
- Treasure Box
 - Occupies child during the session.
- Paintings/Drawings from daughter
- Encourage student to bring child to appointments
 - Reduces pressure of finding babysitter

Student feels understood

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Did you know?

- About 26% of undergraduate students are parents
- 43% of parenting students are single mothers
- 32% of college women are raising dependent children
- 13% students are single parents
- Less than 1 in 10 students with children complete a bachelor's degree within 6 years of college entry
- 61% of women who have children after enrolling in community college fail to finish there degree
 - This represented a 65% higher non completion rate than for those without children
 - Unplanned births account for nearly 1 in 10 dropouts among female students at community colleges and 7% of dropouts among college students overall

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Mental Health Implications

- Depression During Pregnancy
- Post-Partum Depression
- Post-Partum Anxiety
- Post-Partum Obsessive Compulsive Disorder
- Post-Traumatic Stress Disorder

Refer to Counseling or Mental Health Center if you suspect the student is struggling

• "I'm worried about you. You seem to be struggling. Would you like me to call the counseling center and help you make an appointment?"

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Depression During Pregnancy (not just hormones!)

14-23% of women will struggle with some symptoms of depression during pregnancy.

Possible Complications

- Depression can lead to self-treatment or not caring for one self such as smoking, eating, drinking or drugging which can affect both the mother and unborn child
 - Premature Birth
 - Low birth weight

Possible Triggers

- Hormones
- Pregnancy Complications
- **Unplanned pregnancy**
- Relationship Problems
- History of Depression
- Infertility Treatments
- Previous Pregnancy Loss
- Stressful Life Events
- History of Abuse or Trauma



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Symptoms of Post-Partum Depression

- Sense of feeling overwhelmed
- Feeling guilty that you should be a better mother
- Feeling like your baby would be better off without you
- Lack of bond with the baby
- Can't stop crying
- Sadness
- Feeling of emptiness, numbness and disconnection
- Can't sleep
- Can't eat
- Not taking care of self
- Feeling of hopelessness



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6 Stages of Post Partum Depression

- **Denial:** This must be what new motherhood is like.
- **Anger:** This is supposed to be a time of joy. I don't want to have to take medication. I don't like the baby. I wish I didn't have a baby. I don't want to go to therapy. I shouldn't have to call a doctor. This is not fair.
- **Bargaining:** If I just exercise more and eat better I'll be fine. If I could just get to the point where the baby sleeps through the night, I'll be okay. I just need to work harder.
- **Depression** They all would be better off without me.
- **Acceptance:** What's happening to me isn't normal and I can't ignore it anymore. I need to get better for myself and my family. It's not my fault. It's okay for me to ask for help.
- **Post-Traumatic Stress Disorder Stage** You start feeling better—but aren't 100%.

Reference: Post Partum Progress-Katherine Stone



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Post Partum Complications: Anxiety & OCD

You may have **postpartum anxiety** or **postpartum OCD** if you have had a baby within the last 12 months and are experiencing *some* of these symptoms:

- Racing thoughts
- You can't stop doing
- Excessive worrying
- Disturbing thoughts
- Afraid to be alone with your baby.
- Hyper-vigilance
- Physical symptoms
- You can't eat. You have no appetite.
- You're having trouble sleeping.

Post-Partum Anxiety (10%) is more common than Post Partum-Depression



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Post-Partum OCD

- Anxiety Disorder
- 2-9% of post partum mothers
- Strong urges to perform certain repetitive behaviors (compulsions), and have repeated, unwanted, and negative thoughts (obsessions)
- Usually revolve around the baby
- Repeated negative thoughts
- The severity of the symptoms varies from mildly bothersome to virtually unbearable.
- Some mothers live in constant fear that they will bring about serious harm to their baby, or even death.



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Post Partum PTSD

• *According to Post Partum Progress, "9% of women who deliver a baby will go on to develop symptoms of post-traumatic stress after birth."*

Symptoms:

- **Intrusion symptoms:** Repetitive re-experiencing of the birth trauma through flashbacks, nightmares.
- **Avoidance symptoms:** Attempts to avoid reminders of the birth experience and thoughts about the birth experience.
- **Increased arousal symptoms:** Difficulty sleeping, heightened anxiety, irritability, and concentration challenges.



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Possible Causes Post Partum PTSD

- **A perception of lack of caring:** Moms feel abandoned/unsupported by providers/partners during their pregnancy/childbirth experience.
 - Baby-Friendly Hospitals (mom-unfriendly)/Elimination of Nurseries
- **Poor communication:** Moms feel unheard/uninformed during childbirth
- **Feelings of powerlessness:** Moms feel unprotected and under-supported by medical/birth staff. Loss of control
- **A re-triggering of old trauma histories or fears:** Moms went into childbirth with intense fear and uncertainty that was not addressed.
- **Does a healthy baby justify a traumatic delivery?** Moms feel that attention was on health and well-being of her baby while she went "unnoticed."
- **Premature-Delivery**
- **NICU Stay**
- **C-Section Delivery**
- **Traumatic Childbirth/Complications**

Suggested Viewing: <http://mothermavithemovie.com/> Trigger Warning

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Does your institution's policies and services support Pregnant and Parenting students?

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Review your institution's policies and services

- Attendance Policies
- Incomplete Grades
- Switching to online sections without penalty
- On campus day care
- Can students bring children to class?
- Changing stations
- Medical Insurance
- Nursing Stations
- Student Health Centers
- Family Housing
- Parking
- Flexible class times
- Women's Center
- Counseling
- ???

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Best practices

- Establish one department to serve as the central point of contact
- Establish Incomplete procedures to allow more time to complete work
- Establishing parenting groups
- Special accommodations
 - Develop a Parental Accommodation Policy
 - rescheduling exams/extended deadlines
 - excused absences
 - providing alternatives to complete missed work
 - notetaker during missed classes
 - recording of the class, and/or notes sent electronically by the professor
 - Pregnant and postpartum women may require a larger desk, breaks during class while pregnant or nursing, access to elevators if restricted.
 - Special Parking Spaces
 - Private and comfortable Lactation/Pumping Rooms
 - Changing Tables in every building



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Accommodations

Provide Reasonable Accommodations-Refer to Disability Services

- As many pregnancy-related conditions constitute disabilities under the Americans with Disabilities Act, advise pregnant students that they may seek accommodation through your school's ADA office.
- Lactating students should be granted reasonable break time and space to pump breast milk in a location that is clean, private, and reasonably accessible.
- Many students negotiate accommodations on their own—but doing so can be challenging. Make sure to identify a resource for students who need help



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Does your school have a policy or leave it up to the instructor?

Policy on Children in Class
 Currently, the university does not have a formal policy on children in the classroom. The policy described here is just a reflection of my own beliefs and commitments to student, staff and faculty parents.

- 1) All exclusively breastfeeding babies are welcome in class as often as is necessary;
- 2) For older children and babies, I understand that unforeseen disruptions in childcare often put parents in the position of having to miss class to care for their child. While this is not meant to be a long-term childcare solution, occasionally bringing a child to class in order to cover gaps in care is perfectly acceptable;
- 3) I ask that all students work with me to create a welcoming environment that is respectful of all forms of diversity, including diversity in parenting status;
- 4) In all cases where babies and children come to class, I ask that you sit close to the door so that if your little one needs special attention and is disrupting learning for other students, you may step outside until their need has been met;
- 5) Finally, I understand that often the biggest barrier to completing your coursework once you become a parent is the time that many parents feel in the evening once children have finally gone to sleep. While I maintain the same high expectations for all students in my classes regardless of parenting status, I am happy to problem-solve with you in a way that makes you feel supported as you strive for school/parenting balance.



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College at Brockport Policy Statement

In exceptional instances, extenuating circumstances may arise when students wish to bring minor children with them to campus. Upon such occasions, with the instructor's advance permission, children may be brought into the classroom, but they must remain under the direct supervision of the student and shall not be permitted to disrupt the learning environment



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Role Model-Community College of Philadelphia

- **A \$1.5M Grant to Pay for Child Care Will Keep More CCP Student-parents in School, on Track**
- SELPHI provides services to expectant and parenting teens and young adults, including coparents, between the ages of 16-24 in Philadelphia.
- SELPHI aims to improve the educational, social, and economic outcomes that shape participants' health and the health of their children
- SELPHI will increase parents' readiness to care for their child and ultimately their own self-image. Within this skill-building model, SELPHI promotes self-sufficiency and sets families on a path to success. Services are delivered through a case navigation service model.



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University Role Model-University of California Berkeley

University of California-Berkeley

- Berkeley began including a [notice of accommodation](#) for pregnant and parenting students in its campus-wide notice on student accommodations. The notice reminds instructors of their responsibilities to excuse students' medically-necessary absences and make accommodations.



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University Role Model-University of Washington



- Special website that clearly identifies points of contact for accessing resources
- The university makes clear linkages between pregnancy and disability services.
- Published the "[For Pregnant Students](#)" brochure" identifies legal rights and on campus support resources.
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University Role Model-University of Georgetown

- Provides pregnancy Testing Kits
- Student insurance plan-covers student/child
- Housing for student moms
- Childcare and babysitting services
- Babycare supplies
- Lactation rooms
- Annual Pregnancy Resource Forum



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University Role Model-Cornell



- Created a website, "[Students With Families](#)" that contains information for expectant students and parenting students.
- Most importantly, the website identifies key contacts within various departments to serve as advisors or points of contact for pregnant students.

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MIND BLOWN!



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Supporting the Academic Success of Pregnant and Parenting Students Under Title IX of the Education Amendments of 1972



- "ED's regulation implementing Title IX specifically prohibits discrimination against a student based on pregnancy, childbirth, false pregnancy, termination of pregnancy, or recovery from any of these conditions."



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Supporting the Academic Success of Pregnant and Parenting Students Under Title IX of the Education Amendments of 1972 Continued

"...a school must excuse a student's absences because of pregnancy or childbirth for as long as the student's doctor deems the absences medically necessary. When a student returns to school, she must be allowed to return to the same academic and extracurricular status as before her medical leave began. Any special services provided to students who have temporary medical conditions must also be provided to a pregnant student."



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U.S. Department of Education Office for Civil Rights



Your School MUST:

- Allow you to continue participating in classes and extracurricular activities even though you are pregnant.
- Allow you to participate in classes and extracurricular activities even though you are pregnant and not require you to submit a doctor's note unless your school requires a doctor's note from all students who have a physical or emotional condition requiring treatment by a doctor
- Provide you with reasonable adjustments, like a larger desk, elevator access, or allowing you to make frequent trips to the restroom.
- Excuse absences due to pregnancy or childbirth for as long as your doctor says it is necessary.
- Allow you to return to the same academic and extracurricular status as before your medical leave began, which should include giving you the opportunity to make up any work missed while you were out.
- Ensure that teachers understand the Title IX requirements related to excused absences/medical leave.
- Provide pregnant students with the same special services it provides to students with temporary medical conditions.



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What are my next steps?

- Learn more from your Center on Disability and Title IX Coordinator
 - Learn your institution policies
- Share this information
- **Do not advise a pregnant student to withdraw from their classes or not to take classes next semester!**
- Make pregnant students aware of their rights under title IX and refer to the Center on Disability
- Pregnant and Kid friendly office?
- Discuss Mental Health Challenges-Reduce the Stigma
- Review/Change Policies
- Advocate!



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Pregnancy and post partum resources

- <https://thepregnantscholar.org/>
- <http://www.ncaa.org/sites/default/files/PregnancyToolkit.pdf>
- <https://www2.ed.gov/about/offices/list/ocr/docs/dcl-know-rights-201306-title-ix.html>
- <http://www.postpartumprogress.com/>
- <https://www.marchofdimes.org/index.aspx>
- <http://www.postpartum.net/>
- <https://www.meetup.com/>
- <https://postpartumhealthalliance.org/>
- National Women's Law Center
- Disability Office
- Title IX Coordinator



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VIRTUAL
 24HR NACADA CONFERENCE

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Thank You!
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Please take a minute to complete a session eval using the link or QR code below:
<http://bit.ly/24hrEval>



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