

# DC MOMS Partnership<sup>SM</sup> Pilot Evaluation Report

## Executive Summary

### OVERVIEW

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The DC Department of Human Services (DHS) partnered with Elevate Policy Lab to bring the Mental Health Outreach for MotherS (MOMS) Partnership® model to the district's TANF program as the DC MOMS Partnership<sup>SM</sup> (DC MOMS). The MOMS Partnership was designed to reduce depressive symptoms and meet the mental health needs of low-income mothers and primary caregivers. At the core of the model is MOMS Stress Management (SM), an 8-week, Cognitive Behavioral Therapy-based group course. The DC MOMS Pilot delivered the MOMS SM course to 183 TANF customers between April 2019 and February 2021. Services were delivered in person between program launch and March 2020, when the pilot transitioned to virtual service delivery in response to the COVID-19 pandemic.

Elevate carried out an evaluation of the DC MOMS Pilot, including a pre-post study of participant outcomes and a randomized delayed-start study. This report addresses findings from the pre-post study, which includes data from a subset of 84 participants in Cohorts 1 – 7 of the DC MOMS Pilot. The evaluation examined participation in and satisfaction with DC MOMS, as well as outcomes from participant self-reported data. The pre-post evaluation aimed to answer the following questions:

- Did DC MOMS participants experience improvements in measures of mental health following participation in the SM course?
- Did DC MOMS participants experience increased social support following participation in SM?
- Did DC MOMS participants experience improvements in economic security following participation in SM?
- Did DC MOMS participants experience improvements in their parenting experience following participation in SM?

### KEY FINDINGS

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#### Participant Characteristics

Among 84 participants included in the study, most identified as Black or African American and Non-Hispanic, were single, and had at least a high school education or GED. At the start of MOMS SM, almost 50% of participants indicated needing mental health treatment or counseling in the last year but not receiving it.

#### Participation

Participants attended most classes (6 out of 8). About 40% of participants attended at least 7 classes, and 21% attended all 8 classes. There was no significant difference in MOMS SM attendance and

assessment completion between participants who attended MOMS SM in person and those who attended virtually after March 2020.

Most participants (88%) said they were “Satisfied” or “Very satisfied” with the MOMS SM course. Participants also shared reflections on the difference that the MOMS SM course has made in their lives, including that:

*“The program gave me techniques that best suited me and my situation to help me to defuse stress in my life. I'm grateful to have attended the program.”*

*“I have gained a lot of insight about myself... DC MOMS has taught me great strategies to handle my stress that I actually use in my everyday life and actually see progress.”*

## **Mental Health and Wellbeing**

Participants experienced significant improvements across a number of mental health measures. Participants’ depressive symptoms decreased significantly between Baseline and Endpoint and remained significantly lower at 3-Month Follow-Up. At Endpoint and 3-Month Follow-Up, more than twice as many scored below the threshold for risk of clinical depression on the CES-D scale than at Baseline. Perceived stress and anxiety symptoms decreased significantly between Baseline and Endpoint.

## **Social Support**

Participants experienced significant increases in perceived social support across all types of support measured, and scores remained significantly higher at 3-Month Follow-Up than at Baseline. In addition, participants reported significantly greater instrumental support — support to meet concrete and tangible needs — at Endpoint and 3-Month Follow-Up compared to Baseline.

## **Economic Security**

A larger proportion of DC MOMS participants reported “no trouble” paying for certain goods at Endpoint compared to Baseline. The percentage of participants who reported a high level of financial stress decreased significantly between Baseline and Endpoint and remained significantly lower at 3-Month Follow-Up.

## **Parenting Skills and Satisfaction**

Participants reported an increase in their perception of effective limit setting with their child(ren) at 3-Month Follow-Up.

## **CONCLUSION**

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The DC MOMS pilot was well-received by participants, with high levels of attendance and program satisfaction. While this study was limited by small sample size and an observational pre-post design, the evaluation suggests that DC MOMS was associated with positive outcomes for participants’ well-being, including significant improvements in depression, stress, and anxiety, as well as significant and sustained increases in perceived social and instrumental support. Maternal mental health has been identified as an important factor in longer-term child outcomes; these findings are encouraging for participants and their families and support the alignment of DC MOMS with DHS’s

two-generational approach to family and child wellbeing. Elevate and DC DHS continue to explore opportunities for further investigation of the pilot data to further understand the DC MOMS program and its impact.

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**For the full DC MOMS Partnership<sup>SM</sup> Pilot Evaluation Report, please contact Elevate Policy Lab at [elevate@yale.edu](mailto:elevate@yale.edu).**

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