***Subject to change***

**CCPX 4132-001: Perinatal Mental Health:**

**Clinical and Counseling Perspectives**

3.0 credits

Spring 2023

Mondays, 5:10-6:50pm EST

In-Person

Instructor: Venus Mahmoodi, PhD

E-mail: vm2607@tc.columbia.edu

Office Hours: Available before and after class. Email for appointment.

**Course Description:**

This course will utilize history, theory, research, classroom discussion, personal anecdotes (e.g. videos, podcasts, and blogs), news, and social media to help students to develop a broad understanding of the issues related to perinatal mental health. The course is an opportunity to help students expand their current thinking about perinatal mental health and family building, with an emphasis on understanding individuals’ diverse experiences, as well as the changing landscape of perinatal and reproductive mental health. An important aspect of this course is an ongoing, collaborative discussion of family building issues as they relate to diversity, including issues related to race, ethnicity, religion, age, sexual orientation, gender identity, marital status, socioeconomic status, immigration status, adoption, foster parenting, experiences related to assisted reproductive technology, and other alternative family structures.

**Learning Objectives:**

Students will engage in class discussions, readings, and papers to develop a broad understanding of the complex and rich issues related to mental health before, during, and after pregnancy and family building. Students will understand the etiology, theories, and treatment modalities for psychopathology around pregnancy and postpartum. Students will also develop knowledge in special topics related to the psychology of family building, including in the areas of reproductive loss and trauma, fertility, policy and legal issues, and diversity/disparities in treatment. Students will develop an understanding between symptom presentation, race/ethnicity, and barriers to seeking support. This course should raise more questions than answers to these increasingly complex topics.

**Prerequisites:**

Graduate or Continuing Education student status.

Prior undergraduate and/or graduate coursework in psychology is preferred, but not required.

**Required Reading:**

Textbook:

Wenzel, A. (Ed.) (2016). The oxford handbook of perinatal psychology. New York, NY: Oxford

University Press.

(Available online through CLIO or you may purchase the book through the publisher, Oxford University Press ([https://global.oup.com/academic/product/the-oxford-handbook-of-perinatal-psychology-9780199778072?q=amy%20wenzel&lang=en&cc=us#](https://global.oup.com/academic/product/the-oxford-handbook-of-perinatal-psychology-9780199778072?q=amy%20wenzel&lang=en&cc=us)))

Journal Articles:

All journal articles are linked on Canvas along with PDFs unless otherwise indicated.

**Optional Reading:**

CU has most books available in electronic form. Other readings and media will be available on Canvas or a quick search online on CLIO.

**Course Requirements and Breakdown of Grades:**

**20% - Class Participation – Attendance and Discussion**

Please come to class prepared by having thoroughly and thoughtfully completed the readings and assignments to engage in group discussion. Most classes will have required readings, as well as optional readings or assignments. Every lecture will have either aa whole-class or small-group discussions.

Think about all your interactions with peers, course assistant, and professor. Be courteous, punctual, and thoughtful in your interactions.

**20% - Reaction Papers**

You will write five reaction papers on topics that pique your interest throughout the semester.

Please submit your reaction papers (about 500 words, or 2 pages max, Times New Roman size 12 font, double spaced, with 1” margins) to Canvas. Include your name, date, and a title (e.g. Reaction Paper #1) in the file name.

Reaction papers should be written in the first person. They do not need to include formal citations or have the scholarly tone that you might use in the research paper, or in other academic work. Papers are graded for completion and timeliness; there is no right or wrong reaction. Papers can highlight your reactions to readings, media, or class discussions. They can integrate all of the above or make comparisons. Reaction papers should reflect thoughtful, critical thinking, and in particular, your personal experiences assimilating and accommodating new knowledge to what you had previously understood about perinatal mental health. Please do not simply summarize the material! In your reflections, consider the following questions: What did you learn? What shifted your thinking? How can you apply what you learned to your own life? What emotions came up?

**30% - Case Conceptualization**

Students may choose a case from the list provided on Canvas, use a former case (deidentified), movie character, or personal acquaintance (deidentified) to develop a case conceptualization. Students will then write a biopsychosocial background on the patient, possible diagnoses and rule outs, effective treatments, and case formulation based on the case details. Requirements of the assignment and examples are posted in Canvas and we will discuss details of the assignment in class to answer any further questions. Papers should be 5-8 pages without references. The bulk of the paper should be the case formulation and will be the section in which you will also incorporate citations from the literature.

For students interested in developing a stronger clinical skill in conceptualizing perinatal cases, the instructor can provide additional resources and additional assignments to build clinical competence in perinatal mental health.

**30% - Final Examination**

The final exam will open at 5:10pmEST and will close at 6:50pmEST on May 8th. It will include three essay questions covering class readings and discussions from the entire semester. Essays will require synthesis of the course material and discussions in essays rather than regurgitating memorized material.

Class will not be held on this day. Students will be expected to complete their exams and submit them within the designated timeframe.

Students may use any course materials during the exam, but they may not consult with one another. This must be your original work.

For students with accommodations with OASID, the time allocated for the exam will be adjusted in accordance to those accommodations.

**COURSE POLICIES**

1. Class Attendance - A significant portion of the grade in this class is based on class discussion and participation. The expectation is that you will attend all classes and participate in an active way. Missing classes will affect your class participation grade. If you are unable to attend live sessions, need to miss a live class due to illness or other emergency, or need to be tardy, please reach out to me using the contact information listed in the syllabus. Please contact me prior to class if you will not attend or will be late. For religious observation, please send me a message letting me know you will miss class.

For online students, I will be recording each class and will send out recordings by Thursday evening. If you miss a class discussion, you will have to submit a one-paragraph reflection of the discussion question on Canvas for that class to receive credit for participation.

1. Cell Phone Policy - Please turn off or silence cell phones. The use of cell phones and other mobile devices during class is a distraction, irritation, and sign of disrespect to everyone. A short break will be provided mid-class, during which you may check mobile devices.
2. Due Dates - All assignments will be due at the time specified in the syllabus. If you have trouble completing an assignment on time, you should contact me by **noon the day before the assignment is due** and propose an extension date (no more than 2 days from the due date).

If you require a longer extension, email me the assignment, reason for requesting the extension and date by which you will submit the assignment (less than 2 weeks after deadline). There must be justification provided for an extended deadline.

If you require accommodations for the entire semester, please reach out to OASID to begin the process of obtaining extended accommodations.

1. Grading Policy - Grades will be based on the compilation of points gained from each of the requirements, with 100 points being the maximum. Evaluations are based on 100 points:

|  |  |  |  |
| --- | --- | --- | --- |
| A | 93-100 | C+ | 78-80 |
| A- | 90-92 | C | 75-77 |
| B+ | 87-89 | C- | 71-74 |
| B | 84-86 | F | 70 and below |
| B- | 81-83 |  |  |

1. Communication with the Instructor – I am happy to correspond between classes via

e-mail and phone. I will respond to e-mails and calls within 1-3 days. To facilitate this process, in e-mails, please include CCPX 4132 at the beginning of the subject line. I highly encourage you to reach out to me in case of an absence or tardiness.

**TC POLICIES**

1. **Accommodations** – The College will make reasonable accommodations for persons with documented disabilities. Students are encouraged to contact the Office of Access and Services for Individuals with Disabilities (OASID) for information about registration. You can reach OASID by email at oasid@tc.columbia.edu, stop by 301 Zankel Building or call 212-678-3689. Services are available only to students who have registered and submit appropriate documentation.  As your instructor, I am happy to discuss specific needs with you as well.  Please report any access related concerns about instructional material to OASID and to me as your instructor.
2. **Incomplete Grades** – For the full text of the Incomplete Grade policy please refer to [http://www.tc.columbia.edu/policylibrary/Incomplete Grades](http://www.tc.columbia.edu/policylibrary/Incomplete%20Grades)
3. **Student Responsibility for Monitoring TC email account**– Students are expected to monitor their TC email accounts. For the full text of the Student Responsibility for Monitoring TC email account please refer to [http://www.tc.columbia.edu/policylibrary/Student Responsibility for Monitoring TC Email Account](http://www.tc.columbia.edu/policylibrary/Student%20Responsibility%20for%20Monitoring%20TC%20Email%20Account)
4. **Religious Observance**– For the full text of the Religious Observance policy, please refer to <http://www.tc.columbia.edu/policylibrary/provost/religious-observance/>
5. **Sexual Harassment and Violence Reporting** – Teachers College is committed to maintaining a safe environment for students. Because of this commitment and because of federal and state regulations, we must advise you that if you tell any of your instructors about sexual harassment or gender-based misconduct involving a member of the campus community, your instructor is required to report this information to the Title IX Coordinator, Janice Robinson.  She will treat this information as private, but will need to follow up with you and possibly look into the matter.  The Ombuds Officer is a confidential resource available for students, staff and faculty, including matters concerning “Gender-based Misconduct”. “Gender-based misconduct” includes sexual assault, stalking, sexual harassment, dating violence, domestic violence, sexual exploitation, and gender-based harassment.  For more information, see <http://sexualrespect.columbia.edu/gender-based-misconduct-policy-students>. The TC Ombuds Officer may be reached at ombuds@tc.columbia.edu or 212-678-4169.
6. **Emergency Plan** – TC is prepared for a wide range of emergencies. After declaring an emergency situation, the President/Provost will provide the community with critical information on procedures and available assistance. If travel to campus is not feasible, instructors will facilitate academic continuity through Canvas and other technologies, if possible.
7. It is the student’s responsibility to ensure that they are set to receive email notifications from TC and communications from their instructor at their TC email address.
8. Within the first two sessions for the course, students are expected to review and be prepared to follow the instructions stated in the emergency plan.
9. The plan may consist of downloading or obtaining all available readings for the course or the instructor may provide other instructions.
10. Academic Integrity - Students who intentionally submit work either not their own or without clear attribution to the original source, fabricate data or other information, engage in cheating, or misrepresentation of academic records may be subject to charges. Sanctions may include dismissal from the college for violation of the TC principles of academic and professional integrity fundamental to the purpose of the College.

**COURSE SCHEDULE**

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| --- | --- | --- | --- |
| Class | Date | Topic of Discussion | Assignments Due |
| 1 | Jan 23 | Introduction to course; History of Perinatal Mental Health |  |
| 2 | Jan 30 | Normative Perinatal Experiences |  |
| 3 | Feb 6 | Introduction to PMADs | **Reaction Paper #1** |
| 4 | Feb 13 | Perinatal Depression |  |
| 5 | Feb 20 | Perinatal Anxiety | **Reaction Paper #2** |
| 6 | Feb 27 | Perinatal Psychosis & Severe Psychopathology |  |
| 7 | Mar 6 | Perinatal Trauma | **Reaction Paper #3** |
| - | **Mar 13** | **Spring BREAK** | **No Class** |
| 8 | Mar 20 | Case Conceptualization – Discussion and Group Project |  |
| 9 | Mar 27 | Treatment I |  |
| 10 | Apr 3 | Treatment II and Advocacy | **Reaction Paper #4** |
| 11 | Apr 10 | Perinatal Loss  |  |
| 12 | Apr 17 | Fertility and ARTs  |  |
| 13 | Apr 24 | COVID-19 and PMADs  | **Case Conceptualization Due** |
| 14 | May 1 | Vulnerable Populations/Cultural Considerations  | **Reaction Paper #5** |
| 15 | May 8 | Final Exam – Online – Canvas – No in-person class  | **Final Exam** |

**DETAILED COURSE SCHEDULE**

**CLASS 1: 1/23/23**

Introduction to the Course, Syllabus, Instructor, and Classmates

History of Perinatal Mental Health: Hippocrates, Marcé, Psychoanalysis and Beyond

REQUIRED READINGS

Dunn, P.M. (1993). Hippocrates (460-c 356 BC) and the founding of perinatal medicine.

Archives of Disease in Childhood, 69, 540-1.

Merskey, H, Merskey, S. J. (1993). Hysteria, or “suffocation of the mother.” Canadian

 Medical Association Journal, 148 (3), 399-405.

Trede, K., Baldessarini, R.J., Viguera, A.C, & Bottero, A. (2009). Treatise on insanity in pregnant, postpartum,and lactating women (1858) by Louis-Victor Marcé: A commentary. Harvard Review of Psychiatry, 17 (2),157-65.

OPTIONAL READINGS

King, E.F. (1888). Hysteria of a grave form in three successive pregnancies. Journal

 of the American Medical Association, XI(23), 810-11.

King, H. (2013). Motherhood and health in the Hippocratic corpus: Does maternity protect

against disease? M`etis. Anthropologie des mondes grecs anciens, 11, 51–70.

**CLASS 2: 01/30/23**

Psychological, Behavioral, Cognitive, and Biological Experiences in Pregnancy and the Postpartum Period – Focusing on Normative Experiences - Flourishing

REQUIRED READINGS

Wenzel, A. (2016). Introduction: The unique importance of perinatal psychology. In A. Wenzel,

The oxford handbook of perinatal psychology (pp. 1-4). New York: Oxford University Press.

Miller, L.J. (2016). Psychological, behavioral, and cognitive changes during pregnancy and the

postpartum period. In A. Wenzel (Ed.) The oxford handbook of perinatal psychology (pp. 7-25). New York: Oxford University Press.

Schaffir, J. (2016). Biological changes during pregnancy and the postpartum period. In A.

Wenzel (Ed.) The oxford handbook of perinatal psychology (pp. 26-37). New York: Oxford University Press.

Athan, A.M. (2011). Postpartum flourishing: Motherhood as opportunity for positive growth and

self-development (pp. 92-117 only: Chapter IV/Discussion). Doctoral dissertation. Columbia University, New York.

OPTIONAL READING

Barnes, D. L. (2015). The psychological gestation of motherhood. In D.L. Barnes (Ed.), Women’s reproductive mental health across the lifespan (pp. 75-90). Switzerland: Springer International Publishing.

**CLASS 3: 02/06/2023 \*\*Reaction Paper #1 Due\*\***

Etiology, Prevalence, and Continuum of Perinatal Psychopathology; Stress and Pregnancy; Screening for Perinatal Mood and Anxiety Disorders (PMADs)

REQUIRED READINGS

Glover, V. (2016). Maternal stress during pregnancy and infant and child outcome. In A. Wenzel

(Ed.) The oxford handbook of perinatal psychology (pp. 268-283). New York: Oxford University Press.

Hart, K.J. & Flynn, H.A. (2016). Screening, assessment, and diagnosis of mood and anxiety

disorders during pregnancy and the postpartum period. In A. Wenzel (Ed.) The oxford handbook of perinatal psychology (pp. 319-340). New York: Oxford University Press.

Yim, I. S., Stapleton, L. R. T., Guardino, C. M., Hahn-Holbrook, J., & Schetter, C. D. (2015). Biological and psychosocial predictors of postpartum depression: systematic review and call for integration. Annual review of clinical psychology, 11.

OPTIONAL READINGS

Axness, M. & Evans, J. (2015). Pre- and perinatal influences on female mental health. In D.L.

Barnes (Ed.), Women’s reproductive mental health across the lifespan (pp. 3-25). Switzerland: Springer International Publishing.

Henshaw, C. (2015). Screening and risk assessment for perinatal mood disorders. In D.L.

Barnes (Ed.), Women’s reproductive mental health across the lifespan (pp. 91-108). Switzerland: Springer International Publishing.

Kinsella, M.T., & Monk, C. (2009). Impact of maternal stress, depression and anxiety on

fetal neurobehavioral development. Clinical Obstetrics and Gynecology, 52(3), 425-40.

Wenzel, A. (2015). Perinatal distress: An overview. In A. Wenzel. Cognitive behavioral

therapy for perinatal distress (pp.1-12). New York: Taylor & Francis.

**CLASS 4: 02/13/23**

Perinatal Depression

REQUIRED READINGS

Postpartum Depression: Action Towards Causes and Treatment (PACT) Consortium (2015). Heterogeneity of postpartum depression: a latent class analysis. The lancet. Psychiatry, 2(1), 59–67. https://doi.org/10.1016/S2215-0366(14)00055-8

Misri, S., Abizadeh, J. & Nirwan, S. (2016). Depression during pregnancy and the postpartum

period. In A. Wenzel (Ed.) The oxford handbook of perinatal psychology (pp. 111-131). New York: Oxford University Press.

Shorey, S., Chee, C. Y. I., Ng, E. D., Chan, Y. H., San Tam, W. W., & Chong, Y. S. (2018). Prevalence and incidence of postpartum depression among healthy mothers: a systematic review and meta-analysis. Journal of psychiatric research, 104, 235-248.

OPTIONAL READINGS AND MEDIA

Frank, H., & Stielstra, M. (2014). "Episode #42: Peeping Mom." Audio blog post. The Longest

Shortest Time. WNYC Radio, 29 Oct. 2014.

<http://longestshortesttime.com/podcast-42-peeping-mom/>

Goddard, J. (2012). "The Hardest Two Months of My Life." Web log post. Cup of Jo. Joanna

Goddard, Feb. 2012.

<http://cupofjo.com/2012/02/motherhood-mondays-the-hardest-two-months-of-my-life/>

Kim, P. & Swain, J.E. (2007). Sad dads: Paternal postpartum depression. Psychiatry (Edgmont),

4(2), 35.47.

Kleiman, K.R. & Raskin, V.D. (2013). I haven’t been myself since the baby was born: Recognizing postpartum depression. In K.R. Kleiman & V.D. Raskin. This isn’t what I expected: Overcoming postpartum depression (pp. 1-29). Boston: Da Capo Press.

Puryear, L.J. (2015). Postpartum Adjustment: What Is Normal and What Is Not. In D.L.

Barnes (Ed.), Women’s reproductive mental health across the lifespan (pp. 109-122). Switzerland: Springer International Publishing.

Shields, Brooke. (2005). Why Am I Crying More Than My Baby? In Down came the rain: My

journey through postpartum depression (pp. 61-87). New York: Hachette Books.

Solomon, A. (2015, May 28). The secret sadness of pregnancy with depression. The New York

Times Magazine. Retrieved from <http://www.nytimes.com/2015/05/31/magazine/the-secret-sadness-of-pregnancy-with-depression.html>

**CLASS 5: 02/20/23 \*\*Reaction Paper #2 due\*\***

Perinatal Anxiety

REQUIRED READINGS

Matthey, S. (2016). Anxiety and stress during pregnancy and the postpartum period. In A. Wenzel (Ed.) The oxford handbook of perinatal psychology (pp. 132-149). New York: Oxford University Press.

Fawcett, E. J., Fairbrother, N., Cox, M. L., White, I. R., & Fawcett, J. M. (2019). The prevalence of anxiety disorders during pregnancy and the postpartum period: a multivariate Bayesian meta-analysis. The Journal of Clinical Psychiatry, 80(4).

Fairbrother, N. & Abramowitz, J.S. (2016). Obsessions and compulsions during pregnancy and the postpartum period. In A. Wenzel (Ed.) The oxford handbook of perinatal psychology (pp. 167-181). New York: Oxford University Press.

OPTIONAL READINGS AND MEDIA

Frank, H. (2015). “Episode #53: When Are You Gonna Be Normal Again?” Audio blog post. The Longest Shortest Time. WNYC Radio, 18 Mar. 2015. <http://longestshortesttime.com/podcast-53-when-are-you-gonna-be-normal/>

Q.C. (last name not provided) (2012). “A Culture of Emotional Restraint: Asian-American Mom

Shares Her Perspective on PPD.” Blog post. Postpartum Progress. 3 Feb. 2012.

<http://www.postpartumprogress.com/a-culture-of-emotional-restraint-asian-american-mom-shares-her-perspective-on-ppd>

Beck, C. T. (2016). Panic attacks during pregnancy and the postpartum period. In A. Wenzel

(Ed.) The oxford handbook of perinatal psychology (pp. 150-166). New York: Oxford University Press.

Kleiman, K. & Wenzel, A. (2011). Dropping the baby and other scary thoughts: Breaking the cycle of unwanted thoughts in motherhood. New York: Taylor and Francis.

Monk C., Myers M.M., Sloan R.P., Ellman L.M., & Fifer W.P. (2003). Effects of women’s stress-elicited physiological activity and chronic anxiety on fetal heart rate. Developmental and Behavioral Pediatrics, 24(1), 32-38.

**CLASS 6: 02/27/23**

Perinatal Psychosis and Severe Psychopathology

REQUIRED READINGS

Bergink, V., Rasgon, N., & Wisner, K. L. (2016). Postpartum psychosis: madness, mania, and melancholia in motherhood. American journal of psychiatry, 173(12), 1179-1188.

Blackmore, E.R., Heron, J. & Jones, I. (2016). Severe psychopathology during pregnancy and the postpartum period. In A. Wenzel (Ed.) The oxford handbook of perinatal psychology (pp. 216-230)). New York: Oxford University Press.

OPTIONAL READINGS

Perkins Gilman, C. (1892). The yellow wall-paper. The New England Magazine, volume unknown, 647-656.

Spinelli, M. (2004). Maternal infanticide associated with mental illness: Prevention and the

promise of saved lives. American Journal of Psychiatry, 161(9), 1548-57.

Twomey, T. (2009). Understanding postpartum psychosis: A temporary madness. Connecticut:

Praeger Publishers.

**CLASS 7: 03/06/23 \*\*Reaction Paper #3 due\*\***

Pregnancy, Birth, and Postpartum Trauma

REQUIRED READINGS

Beck, C.T. (2004). Post-traumatic stress disorder due to childbirth: The aftermath. Nursing

Research, 53(4), 216-224.

Holditch-Davis, D. & Miles, M.S. (2016). Understanding and treating the psychosocial

consequences of pregnancy complications and the birth of a high-risk infant. In

A. Wenzel (Ed.) The oxford handbook of perinatal psychology (pp. 548-572). New York: Oxford University Press.

Kendall-Tackett, K. (2015). Birth trauma: The causes and consequences of childbirth-related

trauma and PTSD. In D.L. Barnes (Ed.), Women’s reproductive mental health across the lifespan (pp. 177-191). Switzerland: Springer International Publishing.

OPTIONAL READINGS AND MEDIA

Frank, H. (2014). "Episode #27: Rewriting Your Birth Story." Audio blog post. The Longest Shortest Time. WNYC Radio, 2 Apr. 2014. <http://longestshortesttime.com/podcast27-rewriting-your-birth-story/>

Simkin, P., & Klaus, P. (2004). Childbirth for the childhood sexual abuse survivor. In P. Simkin & P. Klaus. When survivors give birth: Understanding and healing the effects of early sexual abuse on childbearing women (pp. 59-83). Seattle: Classic Day Publishing.

Simkin, P., & Klaus, P. (2004). Postpartum. In P. Simkin & P. Klaus. When survivors give birth:

Understanding and healing the effects of early sexual abuse on childbearing women (pp. 85-105).

Strauss, I.E. (2015, October 2). The mothers who can’t escape the trauma of childbirth. The

Atlantic. Retrieved from <http://www.theatlantic.com/health/archive/2015/10/the-mothers-who-cant-escape-the-trauma-of-childbirth/408589/>

**CLASS 8: 3/20/23**

Perinatal Case Conceptualization

REQUIRED READINGS

Case Conceptualization - https://ct.counseling.org/2020/12/case-conceptualization-key-to-highly-effective-counseling/

Hagmayer, Y., Witteman, C., & Claes, L. (2021). PACT: A protocol for assessment, mechanism‐based case formulation and treatment planning. Journal of Evaluation in Clinical Practice.

Additional resources available on Canvas, including chapters on different modalities with conceptualizations, assignment description, and student examples.

**CLASS 9: 3/27/23 Treatment Part I**

**CLASS 10: 4/3/23 Treatment Part II + Advocacy \*\*Reaction Paper #4 Due\*\***

Psychotherapy for Perinatal Distress

REQUIRED READINGS

Blum, L. D. (2007). Psychodynamics of postpartum depression. Psychoanalytic Psychology, 24(1), 45-62.

Wenzel, A., Stuart, S. & Koleva, H. (2016). Psychotherapy for psychopathology during pregnancy and the postpartum period. In A. Wenzel (Ed.) The oxford handbook of perinatal psychology (pp. 341-365). New York: Oxford University Press.

Bleiberg, K. & Markowitz, J.C. (2014). Interpersonal psychotherapy for depression. In D. Barlow (Ed.) Clinical handbook of psychological disorders, fifth edition: A step-by-step treatment manual (pp. 332-352). New York: Guilford Press.

Molenaar, N. M., Kamperman, A. M., Boyce, P., & Bergink, V. (2018). Guidelines on treatment of perinatal depression with antidepressants: An international review. *Australian & New Zealand Journal of Psychiatry*, *52*(4), 320-327.

Wenzel, A. & Kim, D. (2016). Psychopharmacology in pregnancy and the postpartum period. In Wenzel (Ed.) *The oxford handbook of perinatal psychology* (pp. 383-407). New York: Oxford University Press.

REVIEW

The Pregnancy Discrimination Act of 1978

Text of Act: <http://www.eeoc.gov/laws/statutes/pregnancy.cfm>
Fact Sheet: <http://www.eeoc.gov/eeoc/publications/upload/fs-preg.pdf>

The Family and Medical Leave Act (1993)
Full Text: <http://www.dol.gov/whd/regs/statutes/fmla.htm>and explore <http://www.dol.gov/whd/fmla/> and

FMLA Poster Explanation: <http://www.dol.gov/whd/regs/compliance/posters/fmlaen.pdf>

Mayor de Blasio Signs Paid Parental Leave Personnel Order for NYC Workers (1/7/16)

[http://www1.nyc.gov/office-of-the-mayor/news/025-16/mayor-de-blasio-signs-paid-parental-leave-personnel-order-nyc-workers#/0](http://www1.nyc.gov/office-of-the-mayor/news/025-16/mayor-de-blasio-signs-paid-parental-leave-personnel-order-nyc-workers)

Overview of the New York State Paid Family Leave Program
<http://www.abetterbalance.org/web/images/stories/Documents/PFLNY.pdf>

OPTIONAL READINGS – Advocacy/Legislation

The Postpartum Resource Center of New York: <http://postpartumny.org/>

Postpartum Support International: <http://www.postpartum.net/>

The 2020 Mom Project: <http://www.2020mom.org/>

Postpartum Progress: <http://www.postpartumprogress.com/>

NY State Maternal Depression Screening Bill (Senate Bill S3137C)(2013)
Full Text: <http://legislation.nysenate.gov/pdf/bills/2013/S3137C>
and explore <https://www.nysenate.gov/legislation/bills/2013/s3137c>

US Preventive Task Force Recommendations re: Perinatal Depression screening (January, 2016) <http://www.nytimes.com/2016/01/27/health/post-partum-depression-test-epds-screening-guidelines.html?_r=0>

Slaughter, A.M. (2012, July/August). Why women still can’t have it all. The Atlantic. Retrieved from <http://www.theatlantic.com/magazine/archive/2012/07/why-women-still-cant-have-it-all/309020/>

Segre, L.S., O’Hara, M.W. & Perkhounkova, Y. (2016). Adaptations of psychotherapy for

psychopathology during pregnancy and the postpartum period. In A. Wenzel (Ed.) The oxford handbook of perinatal psychology (pp. 366-382). New York: Oxford University Press.

Spinelli, M. et al. (2013). A controlled clinical treatment trial of interpersonal psychotherapy for

depressed pregnant women at 3 New York city sites. Journal of Clinical Psychiatry, 74(4), 393-399.

Spinelli, M.G. & Endicott, J. (2003). Controlled clinical trial of interpersonal psychotherapy

versus parenting education program for depressed pregnant women. American Journal of Psychiatry, 160(3), 555-62.

Spinelli, M.G. (1997). Interpersonal psychotherapy for depressed antepartum women: A pilot

study. American Journal of Psychiatry, 154(7), 1028-30.

Wenzel, A. (2015). Cognitive behavioral therapy for perinatal distress. New York: Taylor & Francis.

**CLASS 11: 4/10/2023**

Pregnancy Loss, Miscarriage, Stillbirth, and Neonatal Death

REQUIRED READING

Diamond, D.J. & Diamond, M.O. (2016). Understanding and treating the psychosocial

consequences of pregnancy loss. In A. Wenzel (Ed.) The oxford handbook of perinatal psychology (pp. 487-523). New York: Oxford University Press.

OPTIONAL READINGS AND MEDIA

Frank, H., & Greenberg, A. (2014). "Episode #29: The Shortest Day." Audio blog post. The Longest Shortest Time. WNYC Radio, 30 Apr. 2014. <http://longestshortesttime.com/podcast-29-the-shortest-day/>

Jaffe, J. (2015). The reproductive story: Dealing with miscarriage, stillbirth, or other perinatal

demise. In D.L. Barnes (Ed.), Women’s reproductive mental health across the lifespan (pp. 159-176). Switzerland: Springer International Publishing.

Jaffe, J. & Diamond, M.O. (2011). Reproductive trauma. Washington, DC: American

Psychological Association.

O’Connell White, K. (2010, August 23). The baby I lost… and the life she gave me. Glamour.

Retrieved from <http://www.glamour.com/health-fitness/2010/08/recovering-after-a-miscarriage-the-baby-i-lost-and-the-life-she-gave-me>

Prichep, D. "Adopting a Buddhist Ritual to Mourn Miscarriage, Abortion." Audio blog post. All

Things Considered/Around the Nation. NPR, 15 Aug. 2015.

<http://www.npr.org/2015/08/15/429761386/adopting-a-buddhist-ritual-to-mourn-miscarriage-abortion>

**CLASS 12: 4/17/23**

Fertility, Infertility, Assisted Reproductive Technology, Third-Party Reproduction, and

Fertility Preservation

REQUIRED READINGS

Greil, A.L., Schmidt, L. & Peterson, B.D. (2016). Understanding and treating the psychosocial

consequences of infertility. In A. Wenzel (Ed.) The oxford handbook of perinatal psychology (pp. 524-547). New York: Oxford University Press.

Jaffe, J. & Diamond, M.O. (2011). At a crossroads: Facing third-party reproduction and adoption. In J. Jaffe & M.O. Diamond. Reproductive trauma (pp.135-155). Washington, DC: American Psychological Association.

OPTIONAL READINGS AND MEDIA

Covington, S.N. (1995). The role of the mental health professional in reproductive medicine.

Fertility and Sterility, 64(5), 895-897.

Domar, A., Zuttermeister, P., & Friedman, R. (1993). The psychological impact of infertility: A

comparison with patients with other medical conditions. Journal of Psychosomatic Obstetrics and Gynecology, 14 Suppl, 45-52.

Klock, S.C. (2015). Reproductive psychology and fertility counseling. In S.N. Covington (Ed.),

Fertility counseling: Clinical guide and case studies (pp. 33-44). Cambridge: Cambridge University Press .

Rosen, A.B. (2015). Fertility preservation counseling. In S.N. Covington (Ed.), Fertility counseling: Clinical guide and case studies (pp. 212-225). Cambridge: Cambridge University Press.

Webster, M. (2015). "Birthstory." Audio blog post. Radiolab. WNYC Radio, 22 Nov. 2015.

<http://www.radiolab.org/story/birthstory/> Related readings for the Radiolab podcast:

Holley, S. & Pasch, L. (2015). Counseling lesbian, gay, bisexual, and transgender patients. In S.N. Covington (Ed.), Fertility counseling: Clinical guide and case studies (pp. 180-196). Cambridge: Cambridge University Press.

Ross, L.E. & Goldberg, A.E. (2016). Perinatal experiences of lesbian, gay, bisexual, and

transgender people. In A. Wenzel (Ed.) The oxford handbook of perinatal psychology (pp. 618-631). New York: Oxford University Press.

Thorn, P. & Blyth, E. (2015). Cross-border reproductive services and fertility counseling. In S.N.

Covington (Ed.), Fertility counseling: Clinical guide and case studies (pp. 308-320). Cambridge: Cambridge University Press.

**CLASS 13: 4/24/23 \*\*Case Conceptualization Paper Due\*\***

PMADs and COVID-19

REQUIRED

Iyengar, U., Jaiprakash, B., Haitsuka, H., & Kim, S. (2021). One year into the pandemic: A systematic review of perinatal mental health outcomes during COVID-19. Frontiers in Psychiatry, 12, 845.

Masters, G. A., Asipenko, E., Bergman, A. L., Person, S. D., Brenckle, L., Moore Simas, T. A., . . . Byatt, N. (2021). Impact of the COVID-19 pandemic on mental health, access to care, and health disparities in the perinatal period. Journal of Psychiatric Research, 137, 126-130. doi:https://doi.org/10.1016/j.jpsychires.2021.02.056

Motrico, E., Bina, R., Dominguez-Salas, S., Mateus, V., Contreras-Garcia, Y., Carrasco-Portino, M., . . . Riseup, P. P. D. C.-G. (2021). Impact of the Covid-19 pandemic on perinatal mental health (Riseup-PPD-COVID-19): protocol for an international prospective cohort study. BMC public health, 21(1), 368. doi:10.1186/s12889-021-10330-w

Werner, E. A., Aloisio, C. E., Butler, A. D., D'Antonio, K. M., Kenny, J. M., Mitchell, A., . . . Monk, C. (2020). Addressing mental health in patients and providers during the COVID-19 pandemic. Semin Perinatol, 44(7), 151279. doi:10.1016/j.semperi.2020.151279

OPTIONAL READINGS AND MEDIA

Gibson, C (2021, June). The strange and lonely transformation of first-time mothers in the pandemic. The Washington Post. Retrieved from <https://www-washingtonpost-com.cdn.ampproject.org/c/s/www.washingtonpost.com/lifestyle/on-parenting/first-time-mothers-pandemic-transformation/2021/06/01/026e1c7a-b71d-11eb-96b9-e949d5397de9_story.html?outputType=amp>

Mahaffey, B.L., Levinson, A., Preis, H. et al. Elevated risk for obsessive–compulsive symptoms in women pregnant during the COVID-19 pandemic. Arch Womens Ment Health (2021). https://doi.org/10.1007/s00737-021-01157-w

Mandavilli, A (2021, March). More pregnant women died and stillbirths increased steeply during the pandemic, studies show. The New York Times. Retrieved from <https://www.nytimes.com/2021/03/31/world/pandemic-childbirths.html>

**CLASS 14: 5/1/23 \*\*Reaction Paper #5 Due\*\***

Vulnerable Populations/Cultural Considerations

REQUIRED READINGS:

Gress-Smith, J. L., Luecken, L. J., Lemery-Chalfant, K., & Howe, R. (2012). Postpartum depression prevalence and impact on infant health, weight, and sleep in low-income and ethnic minority women and infants. Maternal and child health journal, 16(4), 887-893.

Onoye, J.M., Goebert, D.A, & Morland, L.A. (2016). Cross-cultural differences in adjustment to

pregnancy and the postpartum period. In A. Wenzel (Ed.) The oxford handbook of perinatal psychology (pp. 632-662). New York: Oxford University Press.

Roshaidai Mohd Arifin, S., Cheyne, H., & Maxwell, M. (2018). Review of the prevalence of postnatal depression across cultures.

Kim-Godwin, Y. S. (2003). Postpartum beliefs and practices among non-Western cultures. *MCN: The American Journal of Maternal/Child Nursing*, *28*(2), 74-78.

OPTIONAL READINGS

Davila, M., McFall, S. L., & Cheng, D. (2009). Acculturation and depressive symptoms among pregnant and postpartum Latinas. Maternal and child health journal, 13(3), 318-325.

Fung, K., & Dennis, C. L. (2010). Postpartum depression among immigrant women. Current opinion in Psychiatry, 23(4), 342-348.

Goyal, D., Murphy, S. O., & Cohen, J. (2006). Immigrant Asian Indian women and postpartum depression. Journal of Obstetric, Gynecologic & Neonatal Nursing, 35(1), 98-104.

Klainin, P., & Arthur, D. G. (2009). Postpartum depression in Asian cultures: a literature review. International journal of nursing studies, 46(10), 1355-1373.

Logsdon, M. C., Monk, C., & Hipwell, A. E. Perinatal Experiences of Adolescent Mothers. In A. Wenzel (Ed.) The oxford handbook of perinatal psychology. New York: Oxford University Press.

O'Mahony, J. M., & Donnelly, T. T. (2013). How does gender influence immigrant and refugee women's postpartum depression help‐seeking experiences?. Journal of psychiatric and mental health nursing, 20(8), 714-725.

Poehlmann, J., & Shlafer, R. (2014). Perinatal experiences of low-income and incarcerated women. In A. Wenzel (Ed.) The oxford handbook of perinatal psychology. New York: Oxford University Press.

Shellman, L., Beckstrand, R. L., Callister, L. C., Luthy, K. E., & Freeborn, D. (2014). Postpartum depression in immigrant Hispanic women: A comparative community sample. Journal of the American Association of Nurse Practitioners, 26(9), 488-497.

Surkan, P. J., Peterson, K. E., Hughes, M. D., & Gottlieb, B. R. (2006). The role of social networks and support in postpartum women's depression: a multiethnic urban sample. Maternal and child health journal, 10(4), 375-383.

Villarosa, L (2018, April). Why America’s Black mothers and babies are in a life-or-death crisis. The New York Times Magazine. Retrieved from <https://www.nytimes.com/2018/04/11/magazine/black-mothers-babies-death-maternal-mortality.html>

**CLASS 15: 5/8/2023 \*\*Final Exam on Canvas\*\***