



Legislation Details (With Text)

**File #:** Res 0403-2024      **Version:** \*      **Name:** Mandating all accredited psychiatry residency programs to offer a one-year, post-residency fellowship program specifically focused on Perinatal Mental Health.

**Type:** Resolution      **Status:** Laid Over in Committee

**In control:** Committee on Mental Health, Disabilities and Addiction

**On agenda:** 5/16/2024

**Enactment date:**      **Enactment #:**

**Title:** Resolution calling upon the New York State legislature to pass, and the Governor to sign, legislation mandating all accredited psychiatry residency programs to offer a one-year, post-residency fellowship program specifically focused on Perinatal Mental Health (PMH).

**Sponsors:** Linda Lee, Lincoln Restler, Jennifer Gutiérrez, Shahana K. Hanif, Mercedes Narcisse

**Indexes:**

**Attachments:** 1. Res. No. 403, 2. May 16, 2024 - Stated Meeting Agenda, 3. Hearing Transcript - Stated Meeting 5-16-24, 4. Committee Report 6/25/24

Date	Ver.	Action By	Action	Result
5/16/2024	*	City Council	Introduced by Council	
5/16/2024	*	City Council	Referred to Comm by Council	
6/25/2024	*	Committee on Women and Gender Equity	Hearing Held by Committee	
6/25/2024	*	Committee on Women and Gender Equity	Laid Over by Committee	
6/25/2024	*	Committee on Mental Health, Disabilities and Addiction	Hearing Held by Committee	
6/25/2024	*	Committee on Mental Health, Disabilities and Addiction	Laid Over by Committee	

Res. No. 403

Resolution calling upon the New York State legislature to pass, and the Governor to sign, legislation mandating all accredited psychiatry residency programs to offer a one-year, post-residency fellowship program specifically focused on Perinatal Mental Health (PMH).

By Council Members Lee, Restler, Gutiérrez, Hanif and Narcisse

Whereas, Affecting 1 in 5 women annually in the United States, Perinatal Mental Health (PMH) conditions stand as the leading cause of maternal mortality in the nation, accounting for 23% of pregnancy-related deaths, with particularly elevated rates among Black and Native American patients, as reported by the Association of American Medical Colleges (AAMC); and

Whereas, PMH conditions are maternal mental health (MMH) conditions that arise from conception until a year after birth, and can include mental health disorders like depression, anxiety, and postpartum psychosis, and their associated symptoms such as sadness, irritability, difficulty concentrating, sleeplessness, and extreme worry; and

Whereas, Studies have shown that pregnancy significantly increases the risk of developing mental health conditions due to factors such as heightened sensitivity to hormonal changes, genetic predispositions to mental illness, sleep deprivation, breastfeeding challenges, and past pregnancy-related traumas, along with substantial shifts in the new mother's relationships, responsibilities, and self-identity; and

Whereas, According to a 2022 study published in the National Library of Medicine on Peripartum (the period between 36 weeks of pregnancy until 6 weeks of postpartum) Mental Health Education, of individuals who do not receive treatment for a depressive episode during pregnancy, 15% will attempt suicide, while more than 50% will continue to suffer from depression in the postpartum period; and

Whereas, Per the American Psychological Association (APA), untreated PMH conditions can have lasting negative consequences for mothers, infants, and families, including increased risk of postpartum depression, anxiety disorders, and impaired child development; and

Whereas, Early intervention and treatment of PMH conditions have been shown to improve maternal and child health outcomes, including reducing the risk of adverse birth outcomes and enhancing mother-infant bonding; and

Whereas, The American College of Obstetricians and Gynecologists recommends MMH screening at least 3 times during the perinatal period, and yet less than 20% of perinatal patients were screened for maternal depression in 2021, according to the Policy Center for Maternal Mental Health (PCMMH); and

Whereas, Research estimates that 50-70% of PMH disorders remain undiagnosed; and

Whereas, Further, 75% of individuals diagnosed with MMH disorders do not receive treatment due to factors such as a shortage of providers specializing in maternal mental health and a nationwide lack of

emphasis on PMH, per PCMMH; and

Whereas, In fact, mental health conditions ranked as the primary underlying cause of pregnancy-associated deaths in New York City in 2020 and the third leading cause of such deaths in New York State in 2018, as reported by the latest data from the New York City Department of Health and Mental Hygiene and the New York State Department of Health, respectively; and

Whereas, Despite how common and potentially serious mental illness is during the peripartum period, there are currently no standardized educational requirements to expose medical students to topics in reproductive psychiatry; and

Whereas, Currently, only 19 psychiatry programs offer PMH-specific fellowships in the country, a number that was zero two decades ago, according to AAMC; and

Whereas, PMH fellowship programs provide psychiatrists with specialized training in areas such as postpartum depression, anxiety disorders during pregnancy, and the impact of mental health on maternal-fetal bonding, enhancing providers' ability to diagnose, treat, and support birthing parents experiencing these challenges; and

Whereas, By requiring accredited psychiatry residency programs to offer PMH-specific fellowship or training, New York State can take a vital step towards ensuring that pregnant and postpartum women and individuals have access to the specialized mental health care they need and deserve; now, therefore, be it

Resolved, That the Council of the City of New York calls upon the New York State legislature to pass, and the Governor to sign, legislation mandating all accredited psychiatry residency programs to offer a one-year, post-residency fellowship program specifically focused on Perinatal Mental Health (PMH).

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