



Mental Health Association in New York State, Inc.

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Memorandum in Support

S.7752 (Brouk)

S.7753 (Brouk)

S.7865 (Brouk)/A.5076-A (Solages)

S.7752 – *AN ACT* directing the commissioner of mental health to establish a maternal mental health workgroup to study and issue recommendations related to maternal mental health and perinatal and postpartum mood and anxiety disorders; and providing for the repeal of such provision upon expiration thereof

S.7753 – *AN ACT* to require the office of mental health and the department of health to conduct a study on the disparate impacts regarding postpartum depression screening tests

S.7865 (Brouk)/A.5076-A (Solages) – *AN ACT* to amend the public health law, in relation to maternal depression screenings

The Mental Health Association in New York State, Inc. (MHANYS) supports legislation to improve maternal mental health in New York State including S.7752 (Brouk), S.7753 (Brouk), and S.7865 (Brouk)/A.5076-A (Solages). Taken together, these three pieces of legislation represent a comprehensive approach for preventing and responding to maternal, perinatal and postpartum mood and anxiety disorders. These bills also help correct for existing disparities in how health and mental health providers screen for and treat maternal mental health conditions, including screening methods that will more accurately detect maternal depression in black and brown women, as well as in nonbinary and transmasculine gestational parents.

Maternal mental health conditions are the most common complication of pregnancy and childbirth, affecting 1 in 5 women and childbearing people during the perinatal timeframe (during pregnancy and first year postpartum). Left undetected and untreated, these illnesses can have long-term negative impact on parents, babies, family, and society. Unfortunately, three quarters of individuals who screen at-risk for postpartum depression will not be treated. The situation is even more dire for women of color who experience postpartum depression at a rate of close to 38 percent compared with approximately 13 to 19 percent for all postpartum women. It is estimated that over half of the instances of maternal depression in women of color go unreported. Further, current maternal mental health screening tools fail to account for social determinants of health that disproportionately impact black and brown women, as well as in nonbinary and transmasculine gestational parents.

This legislation will assure that proper scrutiny and reporting occurs so that New York can better respond to this critical public health need, address existing disparities and refine maternal mental health screening methods. For these reasons MHANYS strongly supports, collectively, S.7752, S.7753, and S.7865/A.5076-A.

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