

**WURZWEILER SCHOOL OF SOCIAL WORK
YESHIVA UNIVERSITY
MSW PROGRAM**

**Perinatal and Postpartum Mental Health,
Identity and Social Work Practice
SWK 6007**

**Fall 2026
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Phone
Office Hours – By appointment**

COURSE DESCRIPTION

This course introduces students to perinatal and postpartum mood and anxiety disorders (PMADs), including postpartum depression, anxiety, bipolar disorder, and psychosis. Students will examine biopsychosocial, cultural, and systemic contributors to PMADs while critically applying theories of change, trauma-informed practice, and culturally responsive interventions. The course emphasizes advocacy, program development, and the social worker's role in addressing inequities in maternal mental health, especially among marginalized populations.

LEARNING OBJECTIVES

At the conclusion of the course, students will be able to:

1. Define PMADs and apply DSM-5-TR criteria.
2. Conduct culturally responsive assessments using validated screening tools.
3. Apply trauma-informed, systemic, and evidence-based interventions to perinatal clients.
4. Analyze the impact of racism and structural inequities on maternal health outcomes.
5. Develop advocacy and policy initiatives to improve maternal mental health equity.
6. Evaluate the effectiveness of interventions and termination processes with diverse populations.

INSTRUCTIONAL METHODS

Learning will occur through lectures, discussions, case vignettes, role-plays, audiovisual resources, practicum integration, and peer-led presentations.

COURSE EXPECTATIONS AND GRADING

Students are required to attend class and arrive on time. Students who miss 2 or more classes can receive a failing grade. Lateness will also be reflected in the final grade.

Assignment	Grade %	Due Date
Assignment: Case Study Analysis	40%	Week 8
Assignment: Policy Brief	35%	Week 14
Participation & Weekly Discussions	15%	Throughout
Attendance	10%	Throughout

Texts for the Course

There is no required text for the course.

COURSE REQUIREMENTS

Assignment: Case Analysis (40%); Due Week 8

The Case Analysis is an individual assignment focused on the creation and analysis of a fictional client experiencing a Perinatal Mood and Anxiety Disorder (PMAD). Students will submit one complete 6–8-page paper in Week 8. The purpose of the assignment is to demonstrate the ability to integrate assessment, diagnosis, theory, intervention, ethics, evaluation, and culturally responsive social work practice into one cohesive clinical analysis.

Case Analysis Required Components:

1. **Client Profile and Presenting Concern (5%)** - Introduce the fictional client and summarize relevant demographic information, pregnancy/postpartum status, presenting concerns, family context, supports, and reason for referral.
2. **Biopsychosocial and Contextual Assessment (5%)** - Provide a biopsychosocial history and identify relevant risk and protective factors. Address social determinants of health and cultural, family, community, and systemic factors that may influence the client's experience.
3. **Assessment, Screening, and Diagnosis (10%)** - Apply DSM-5-TR criteria to identify and support one primary PMAD diagnosis. Incorporate at least one validated screening tool such as the EPDS, PHQ-9, or GAD-7, explain the results, and discuss differential diagnostic considerations when appropriate.
4. **Theoretical Framework (5%)** - Select and explain one relevant theoretical or practice framework, such as ecological systems theory, CBT, interpersonal theory, trauma-informed practice, or another course-based framework. Clearly connect the framework to the client's presentation and needs.
5. **Intervention Plan (5%)** - Propose at least two evidence-based, culturally responsive interventions. Explain why each intervention is appropriate and how services would be delivered, including referrals or interdisciplinary collaboration when relevant.

6. **Ethics and Evaluation (5%)** - Identify at least two ethical considerations and connect them to the NASW Code of Ethics. Describe how progress and treatment effectiveness will be evaluated using measurable outcomes, client feedback, or repeated screening.
7. **Integration, Scholarly Support, and APA Presentation (5%)** - Integrate all sections into a cohesive analysis demonstrating critical thinking and culturally responsive practice. The paper must follow APA 7th edition formatting and include at least five scholarly peer-reviewed references.

Assignment: Policy Brief (35%); Due Week 14

The Policy Brief is a GROUP ASSIGNMENT. Student groups will select a maternal or perinatal mental health policy and develop one integrated policy brief and presentation. The project should demonstrate the group's ability to analyze policy through a social work and reproductive justice lens, identify inequities or gaps, develop evidence-informed recommendations, and propose a culturally responsive program or intervention. The final group project is due on Week 14.

Group Policy Brief Required Components:

1. **Policy Identification and Background (5%)** - Identify the policy, its purpose, history, scope, level of government, target population, and the maternal/perinatal health issue it is intended to address.
2. **Policy Analysis (8%)** - Analyze the policy's major provisions, eligibility or implementation requirements, strengths, limitations, and intended and unintended consequences. Use scholarly and credible policy sources to support the analysis.
3. **Equity, Reproductive Justice, and Social Work Implications (5%)** - Examine how the policy affects diverse birthing people and families, including populations experiencing racial, economic, geographic, or healthcare inequities. Discuss the policy through a reproductive justice and social work lens.
4. **Policy Recommendations (5%)** - Present clear, feasible, evidence-informed recommendations for strengthening, expanding, revising, or implementing the policy. Recommendations should directly respond to the gaps identified in the analysis.
5. **Culturally Responsive Program or Intervention (5%)** - Design a program or intervention that complements the policy and addresses an identified service or equity gap. Include the target population, program purpose, core services or activities, theoretical foundation, cultural responsiveness, and a brief evaluation strategy.
6. **Group Presentation (5%)** - Prepare a 10–12 slide presentation summarizing the policy analysis, reproductive justice implications, recommendations, and proposed program/intervention. Each group will deliver a 10–12 minute presentation followed by peer engagement and Q&A. All group members are expected to participate.
7. **Group Collaboration and Professionalism (2%)** - Groups are expected to divide responsibilities equitably, communicate consistently, meet agreed-upon

deadlines, and submit a cohesive final product. Individual participation may be considered when evaluating this component.

Final Submission Requirements - Each group will submit one complete 6–8-page Policy Brief in APA 7th edition format, excluding the title page and references, along with the final presentation slides. The written brief should use scholarly, governmental, and other credible policy sources.

THE OFFICE OF DISABILITIES SERVICES (ODS) collaborates with students, faculty, and staff to provide reasonable accommodations and services to students with disabilities. The purpose of reasonable academic accommodations is to assure that there is equal access to and the opportunity to benefit from your education at Wurzweiler. It is the student's responsibility to identify himself/herself to the Office of Disabilities Services (ODS) and to provide documentation of a disability. <http://www.yu.edu/Student-Life/Resources-and-Services/Disability-Services/>

Students with disabilities who are enrolled in this course and who will be requesting documented disability-related accommodations should make an appointment with the Office of Disability Services, Wilfods@yu.edu, during the first week of class. All procedures, responsibilities, and expectations will be reviewed during your appointment. The office is located in the Belz Building, suite 412. Once you have been approved for accommodations, please submit your accommodation letter and discuss any specifics with your instructor to ensure the successful implementation of your accommodations.

E-RESERVES

Access full text copies of most of the "on reserve" articles for a course from your computer. You will need Adobe Acrobat to use this service. Your professor will provide you with a password. The link for e-reserves is <http://yulib002.mc.yu.edu:2262/er.php>. Most of the articles in the curriculum are available on electronic reserve (E-reserves). You can access the full text articles from your home or from a university computer at no charge.

ACCESSING E-RESERVES

FROM CANVAS

1. Go to your class Canvas page.
2. Click the link "Library Resources & E-Reserves" (no password required)

FROM CAMPUS

1. If you wish to access e-reserves from the library home page (library.yu.edu),
2. Use "wurzweiler" all lower case, as the password.
3. If you have problems accessing e-reserves, email: Stephanie Gross, Electronic Reserves Librarian: gross@yu.edu or ereserves@yu.edu.

FROM OFF-CAMPUS

1. Go to the library's online resources page:
http://www.yu.edu/libraries/online_resources.asp
2. Click on E-RES; you will be prompted for your Off Campus Access Service login and password.
3. Use "wurzweiler" all lower case, as the password for all courses in all social work programs.
4. If you have problems accessing e-reserves, email: Stephanie Gross, Electronic Reserves Librarian: gross@yu.edu or ereserves@yu.edu.

USING E-RESERVES

1. Click on "Search E-RES" or on "Course Index," and search by instructor's name, department, course name, course number, document title, or document author.
2. Click on the link to your course.
3. When the article text or book record appears on the screen, you can print, email, or save it to disk. To view documents that are in PDF format, the computer you are using must have Adobe Acrobat Reader software. You can download it FREE at www.adobe.com/products/acrobat/readstep2.html

PLAGIARISM

All written work submitted by students is to be their own. Ideas and concepts that are the work of others must be cited with proper attribution. The use of the written works of others that is submitted as one's own constitutes **plagiarism** and is a violation of academic standards. The School will not condone **plagiarism** in any form and will impose sanctions to acts of **plagiarism**. A student who presents someone else's work as his or her own work is stealing from the authors or persons who did the original thinking and writing. **Plagiarism** occurs when a student directly copies another's work without citation; when a student paraphrases major aspects of another's work without citation; and when a student combines the work of different authors into a new statement without reference to those authors. It is also **plagiarism** to use the ideas and/or work of another student and present them as your own. It is **NOT plagiarism** to formulate your own presentation of an idea or concept as a reaction to someone else's work; however, the work to which you are reacting should be discussed and appropriately cited. If it is determined that a student has plagiarized any part of any assignment in a course, the student will automatically **FAIL** the course. The student also will be placed on Academic Probation and will be referred to the Associate Dean for any additional disciplinary action which may include expulsion. A student may not submit the same paper or an assignment from another class for credit. If students or faculty are concerned that written work is indeed plagiarized, they can use the following "plagiarism checker" websites, easily accessible, and generally free on Google:

www.grammarly.com/plagiarism_checker
www.dustball.com/cs/plagiarism.checker
www.plagtracker.com
www.plagium.com/
www.plagscan.com/seesources/

www.duplichecker.com/

As a Wurzweiler student, maintaining good standing in the program is dependent on developing and maintaining high standards of ethical and professional behavior. Students are required to adhere to the Code of Ethics promulgated by the National Association of Social Workers (NASW).

HIPAA

In line with HIPAA regulations concerning protected health information, it is important that you understand that any case information you present in class or coursework will need to be de-identified. What this means is that any information that would allow another to identify the person must be changed or eliminated. This includes obvious identifiers such as names and birth dates but may also contain other information that is so unique to the person that it will allow for identification, including diagnosis, race/ethnicity or gender. If diagnosis, race/ethnicity or gender is directly related to the case presentation, it can be included if it will not allow for identification.

FERPA & OTHER UNIVERSITY POLICIES

Wurzweiler's policies and procedures are in compliance with FERPA regulations. Information about FERPA regulations can be found [here](#).

Drug-Free University Policy can be found [here](#).

Policy Statement on Non-Discrimination, Anti-Harassment, and Complaint procedures can be found [here](#).

The University's Computer Guidelines can be found [here](#).

AI POLICY

The objective of this protocol is to define clear guidelines for the appropriate use of Artificial Intelligence (AI) tools and platforms, such as ChatGPT, at WSSW. These guidelines aim to preserve academic integrity, prevent plagiarism, and promote independent scholarly work while acknowledging the potential benefits of AI tools in enhancing research and learning. Though AI tools do offer some potential for enhancing the learning experience, these tools also present significant risks related to academic dishonesty, particularly plagiarism, and the undermining of critical thinking and originality in scholarly work. Students may use AI tools for the following purposes, provided these uses are in addition to their own creative efforts and they are not relying exclusively on AI:

(1) Research Assistance: ChatGPT and other similar tools should not replace primary research and initial literature searches. Tools such as ProQuest, PubMed, and Google Scholar should first be consulted. Students may use other AI tools to supplement an initial search into a topic, but only after academic databases, libraries, or other reputable scholarly sources are used and referenced. All sources derived from AI should be carefully checked as they are frequently incorrect.

(2) Language Support: AI can assist with language translation, grammar checks, and vocabulary. WSSW's Writing Consultants should be sought for any writing beyond these areas. Tools such as Grammarly may be used to assist in proofreading, but they should not be used in any way to generate ideas, arguments, or content for assignments.

The use of AI language models, such as ChatGPT, for the purposes listed above, are subject to strict adherence to certain conditions. The intent of this policy is to reinforce the importance that students develop and use critical thinking, writing skills, and originality. AI may be seen as a useful tool, but it should not replace the intellectual work that is central to academic growth.

The following actions are prohibited and will be considered academic misconduct:

(1) Content Generation: Students are prohibited from using AI platforms, including ChatGPT, to generate any content submitted as original work.

(2) Conceptualization and Analysis: Students may not use AI tools to develop original arguments, ideas, analysis, hypotheses, conclusions, or to structure, summarize, paraphrase, or contextualize content for assignments. The cognitive work of creating ideas, forming arguments, and critically engaging with course material must be entirely the student's own effort.

If you are in need of assistance in these areas, we advise using the Writing Consultants. The use of AI language models, such as ChatGPT will be checked by your professor to ensure that your work is your own. Turnitin and other plagiarism detection tools will be used to verify the originality of your work. Any submission that includes this content presented as the student's own work constitutes plagiarism (see WSSW Policy Manual). More specifically, any content created that is not your own qualifies as academic misconduct and will be referred to the Student Review Committee for further action. The intent of this policy is to reinforce the importance that students develop and use critical thinking, writing skills, and originality. AI may be seen as a useful tool, but it should not replace the intellectual work that is central to academic and professional growth. If there are questions regarding the authenticity of your work, your professor will contact you.

COURSE OUTLINE

Unit I: What Is Reproductive Justice? (Session 1)

Required Readings:

- Cheney, K., & Rotabi, K. S. (2024). Social Work in a Post-Dobbs World: The 'Adoption Fallacy', Decolonization, and Reproductive Justice. *Affilia*, 39(2), 202–213. <https://doi.org/10.1177/08861099231210941>

Recommended Readings:

Goldblatt Hyatt, E., Younes, M., & Witt, H. (2024). The Moral Conundrum of Reproductive Justice in Social Work. *Journal of Teaching in Social Work*, 44(4), 347–361. <https://doi-org.lehman.ezproxy.cuny.edu/10.1080/08841233.2024.2374251>

Unit II: Maternal Health Disparities, Birth Equity & Social Determinants of Health (Session 2)

Required Readings:

Required Reading:

- Howell, E. A. (2018). Reducing disparities in maternal morbidity. *Clinical Obstetrics & Gynecology*, 61(2), 387–399.

Unit III: Clinical Presentations and Assessment (Sessions 3–7)

Theories, Assessment, and Screening

Session 3: Trauma and Intergenerational Impact

Required Readings

- Lieberman, A. F., & Knorr, K. (2007). The impact of trauma: A developmental framework for infancy and early childhood. *Psychiatric Annals*, 37(6), 416–422. Download Lieberman, A. F., & Knorr, K. (2007). The impact of trauma: A developmental framework for infancy and early childhood. *Psychiatric Annals*, 37(6), 416–422.

Recommended Readings

- Yim, I. S., et al. (2015). Biological and psychosocial predictors of postpartum depression. *Annual Review of Clinical Psychology*, 11, 99–137. Download Yim, I. S., et al. (2015). Biological and psychosocial predictors of postpartum depression. *Annual Review of Clinical Psychology*, 11, 99–137.
- George, C. (2015). Do you have Post-traumatic Slave Syndrome? <https://www.ebony.com/do-you-have-post-traumatic-slave-syndrome> Links to an external site.
- Paudel, N. (2021). Person-centered and trauma-informed approach in social work practice and ways to ensure diversity in both approaches. *Asian Social Work Journal*, 6(5), 21–24.

Session 4: Perinatal Loss, Grief & NICU Trauma

Required Reading:

- Cacciatore, J. (2013). Psychological effects of stillbirth. *Seminars in Fetal & Neonatal Medicine*, 18(2), 76–82.

Session 5: DSM-5-TR Baby Blues vs Depression

Required Reading:

- O'Connor, E., Rossom, R. C., Henninger, M., Groom, H. C., & Burda, B. U. (2016). Primary care screening for and treatment of depression in pregnant and postpartum women: Evidence report and systematic review. *JAMA*, 315(4), 388–406.

Session 6: Postpartum Anxiety; Screening Tools (EPDS, PHQ-9, GAD-7)

Required Reading:

- Cox, J. L., Holden, J. M., & Sagovsky, R. (1987). Detection of postnatal depression: development of the 10-item Edinburgh Postnatal Depression Scale. *British Journal of Psychiatry*, 150(6), 782–786.

Session 7: Postpartum Psychosis & Bipolar Disorder

Required Reading:

- Spinelli, M. (2009). Postpartum psychosis: Detection of risk and management. *American Journal of Psychiatry*, 166(4), 405–408.

Session 8: Assessment

Required Reading:

- Byatt, N., et al. (2013). Patient, provider, and system-level barriers and facilitators to addressing perinatal depression. *Journal of Reproductive and Infant Psychology*, 31(5), 436–449.

Unit IV: Therapeutic and Family Interventions (Sessions 9-12)

Session 9: CBT, IPT, & Group Therapy

Required Reading:

- Sockol, L. E. (2015). A systematic review and meta-analysis of interpersonal psychotherapy for perinatal women. *Journal of Affective Disorders*, 177, 7–21.
- Stuart, S. (2012). Interpersonal psychotherapy for postpartum depression. *Clinical Psychology & Psychotherapy*, 19(2), 134–140.
- Furer, P., Alcolado, G., Reynolds, K., & Hebert, E. A. (2021). Group cognitive-behavioural therapy for perinatal anxiety disorders: Treatment development, content, and pilot results. *Journal of Affective Disorders Reports*, 6, 100195.
- (Individual Case Analysis Due Week 8)

Session 10: Program Development, Community Doula, and Termination

Required Reading:

- Mehra, R., Boyd, L. M., Lewis, J. B., & Cunningham, S. D. (2020). Considerations for building sustainable community health worker programs to

improve maternal health. *Journal of Primary Care & Community Health*, 11, 2150132720953673.

Session 11: Pharmacological and Alternative Approaches

Required Reading:

- Wisner, K. L., Sit, D. K., McShea, M. C., Rizzo, D. M., Zoretich, R. A., Hughes, C. L., ... & Hanusa, B. H. (2013). Onset timing, thoughts of self-harm, and diagnoses in postpartum women with screen-positive depression findings. *JAMA Psychiatry*, 70(5), 490-498.

Session 12: Fathers, Partners & Family Systems

Required Reading:

- Paulson, J. F., & Bazemore, S. D. (2010). Prenatal and postpartum depression in fathers and its association with maternal depression: a meta-analysis. *JAMA*, 303(19), 1961-1969.

Unit V: Policy, and Termination (Sessions 11-13)

Session 13: Policy, Advocacy & the Momnibus Act

Required Reading:

- Kang, E., Stowe, N. E., Burton, K., & Ritchwood, T. D. (2024). Characterizing the utilization of doula support services among birthing people of color in the United States: a scoping review. *BMC public health*, 24(1), 1588.

Unit VI: Integration (Session 14)

- Final project presentations
- Peer feedback
- Reflective course closure.
- (Group Policy Brief & Presentation Due Week 14)