

ASSEMBLY BILL

No. 2317

Introduced by Assembly Member Koretz

February 22, 2006

An act to add and repeal Article 1.6 (commencing with Section 123259) of Part 2 of Division 106 of the Health and Safety Code, relating to maternal health, and making an appropriation therefor.

LEGISLATIVE COUNSEL'S DIGEST

AB 2317, as introduced, Koretz. Postpartum mood and anxiety disorders.

Under existing law, the maternal and child health program includes provisions for pregnancy testing, perinatal health care, child health, and nutrition.

This bill would require the State Department of Health Services to create a Perinatal Mood and Anxiety Disorders (PMAD) Awareness Campaign to increase awareness and provide education to pregnant women and new mothers on postpartum mood and anxiety disorders, including postpartum depression, panic disorder, obsessive-compulsive disorder, and postpartum psychosis, as specified. The bill would require the department to convene a work group, which would be required, not later than June 1, 2008, to prepare and submit to the department specified recommendations relating to the implementation of the awareness campaign.

The bill would require that voluntary funds received for the purposes of this bill be deposited into the Community Postpartum Anxiety and Awareness Campaign Fund, which the bill would create, and would continuously appropriate the moneys in the fund to the department to implement the awareness campaign.

The bill would further provide that if the Department of Finance determines that insufficient voluntary contributions for purposes of implementing these provisions have been deposited with the state by January 1, 2008, the Department of Finance shall notify either the Chief Clerk of the Assembly or the Secretary of the Senate of this fact, in which case these provisions would be repealed on January 1, 2008.

Vote: majority. Appropriation: yes. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. The Legislature finds and declares all of the
2 following:
- 3 (a) Perinatal mood and anxiety disorders occur during
4 pregnancy, as well as during the postpartum period. These
5 disorders can take many forms, including depression, anxiety
6 disorders, such as panic disorder or obsessive-compulsive
7 disorder, and psychosis. Therefore, it is appropriate to use the
8 broader, more accurate term of “perinatal mood and anxiety
9 disorders” to describe the many levels and severities of these
10 afflictions, which can have potentially serious repercussions for
11 the emotional, social, and physical health and well-being of
12 mothers, children, and families.
- 13 (b) Studies have shown that up to 80 percent of women around
14 the world will experience an emotional change after giving birth,
15 a normal postpartum adjustment known as “baby blues.”
- 16 (c) Between 10 and 20 percent of new mothers are affected by
17 perinatal mood and anxiety disorders and may experience
18 symptoms, including, but not limited to, depressed mood,
19 inability to find pleasure in usually engaging activities, sleep
20 disturbances, diminished concentration, appetite and weight loss,
21 anxiety and panic attacks, feelings of guilt and worthlessness,
22 suicidal thoughts, and fears about hurting their baby.
- 23 (d) One to two out of every 1,000 new mothers can experience
24 postpartum psychosis, which may begin with manic states,
25 hyperactivity, an inability to sleep, and avoidance of the baby,
26 and may lead to delusions, hallucinations, incoherence, and
27 thoughts of harming their baby or themselves.

1 (e) A past history of nonpostpartum mood or anxiety disorder
2 and a family history of mood or anxiety disorder increases the
3 risk of postpartum mood or anxiety disorders.

4 (f) Many women are not adequately informed about, screened
5 for, and treated for perinatal mood and anxiety disorders or
6 psychotic disorders because they are uninsured or underinsured
7 and lack access to comprehensive health care. Many of these
8 women also face cultural and linguistic barriers. Great numbers
9 of at-risk women may not get help because they are not informed
10 about perinatal mood, anxiety, and psychotic disorders as part of
11 their health care, and because they are unaware of, or unable to
12 access, services and treatment for perinatal mood disorders,
13 which can include medical evaluations and treatment,
14 professional therapy, counseling, support groups, and crisis
15 hotlines. It is also imperative that family and friends of a
16 pregnant woman or new mother become aware of the signs and
17 symptoms of perinatal mood and anxiety disorders so that they
18 may help her to obtain adequate medical treatment and support
19 services.

20 SEC. 2. It is the intent of the Legislature to enact legislation
21 that would raise awareness regarding postpartum mood and
22 anxiety disorders. The Legislature further recognizes that these
23 disorders can affect all categories of mothers, regardless of their
24 age, race, or income level, have a profound effect on families
25 everywhere, and are very treatable with medication and therapy,
26 or both.

27 SEC. 3. Article 1.6 (commencing with Section 123259) is
28 added to Part 2 of Division 106 of the Health and Safety Code, to
29 read:

30
31 Article 1.6. Perinatal Mood and Anxiety Disorders
32 Community Awareness Campaign

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34 123259. (a) The department shall conduct the Perinatal
35 Mood and Anxiety Disorders (PMAD) Community Awareness
36 Campaign to do all of the following:

37 (1) To provide awareness, assistance, and information
38 regarding PMAD using television, print media, radio, Internet
39 Web sites, outdoor advertising, and other media, where
40 appropriate, to disseminate information to pregnant women and

1 new mothers regarding the availability of services and treatment
2 for PMAD, which may include medication, professional therapy
3 and counseling, support groups, and telephone crisis hotlines.

4 (2) Establish an Internet Web site devoted to providing
5 information about the symptoms and treatment of PMAD that is
6 accessible to the general public.

7 (3) Undertake public education activities related to PMAD, as
8 appropriate.

9 (b) The department shall adopt regulations to provide
10 guidelines for the implementation and administration of this
11 article.

12 (c) To the extent feasible and appropriate, the campaign shall
13 be incorporated into existing mental health awareness programs
14 implemented by the department.

15 123259.1. (a) The department shall convene a work group to
16 develop recommendations on the most efficient and effective
17 ways to raise public awareness of the symptoms, warning signs,
18 and treatment of PMAD. The work group shall also be
19 responsible for securing private contributions to fund the
20 campaign. The department may use nonpublic sources of funding
21 to support the activities of the work group and fund the
22 campaign, such as funding provided by professional
23 organizations and advocacy groups, including, but not limited to,
24 all of the following:

25 (1) The California Medical Association.

26 (2) The American College of Obstetrics and Gynecology.

27 (3) The California Psychiatric Association.

28 (4) Postpartum Support International.

29 (b) Not later than January 1, 2008, the work group shall
30 prepare and submit to the department its recommendations
31 relating to the PMAD campaign.

32 (c) Voluntary contributions received for the purposes of this
33 article shall be deposited into the Community Postpartum
34 Anxiety and Mood Disorders Awareness Campaign Fund, which
35 is hereby created in the State Treasury. Notwithstanding Section
36 13340 of the Government Code, moneys in the fund are hereby
37 continuously appropriated to the department to implement this
38 article.

39 123259.2. (a) This article shall be implemented only after the
40 Department of Finance determines that nonstate funds in an

1 amount sufficient to fully support the activities of this article
2 have been deposited with the state. Thereafter, this article shall
3 continue to be implemented only to the extent that the
4 Department of Finance determines that sufficient nonstate funds
5 to fully support the activities of this article have been deposited
6 with the state for purposes of this article.

7 (b) If the Department of Finance determines that insufficient
8 voluntary contributions for purposes of implementing this article
9 have been deposited with the state by January 1, 2008, the
10 Department of Finance shall notify either the Chief Clerk of the
11 Assembly or the Secretary of the Senate of this fact, in which
12 case, upon the making of their notification, this article shall
13 remain in effect only until January 1, 2008, and as of that date is
14 repealed, unless a later enacted statute, that is enacted before
15 January 1, 2008, deletes or extends that date.