

State of Illinois a leader in legislation on perinatal mental health, study says

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The state of Illinois has emerged as a leader in passing legislation focused on the detection and treatment of perinatal mental health issues, yet more work is needed to improve outcomes for women and their

children, researchers suggested in a recent review of Illinois's policies.

Among the six Illinois policies on these issues enacted since 2008, "there are exceptional examples that capture Illinois's efforts to address perinatal mental health," the team wrote.

Currently, Illinois is one of only five states—along with California, Massachusetts, New Jersey and West Virginia—to require or mandate screening for maternal mental health conditions, according to the study.

"Illinois has sought to address perinatal mental health at the population level using policy as a tool to expand awareness of and develop systems to identify those in need of care—and there are examples that can extend to other states in the nation." said Karen M. Tabb, a social work professor at the University of Illinois Urbana-Champaign and the senior and corresponding author of the paper. Her co-authors were U. of I. social work professor Sandra Kopels; Wan-Jung Hsieh, a professor of social work at National Taiwan University; and U. of I. alumnus Xavier Ramirez.

Illinois had the second lowest rate—8.1%—of postpartum depressive symptoms among the 27 states that collected Pregnancy Risk Assessment Monitoring System data in 2012, according to the study, [published](#) in *Frontiers in Psychiatry*.

An initiative of the U.S. Centers for Disease Control and Prevention, PRAMS collects data on maternal attitudes and experiences before, during and shortly after pregnancy.

Yet, even when depressive symptoms are detected, they often go untreated, as only 22% of the women who screen positive receive mental health treatment, the researchers wrote.

Suicide is a leading cause of death for women up to one year post-delivery. Early detection and treatment could prevent women harming themselves, their children or others, the team wrote.

Illinois was the first state to enact a law that allows untreated or undiagnosed postpartum depression, postpartum psychosis and [anxiety disorders](#) related to pregnancy or childbirth to be used as a defense in criminal cases and as a factor in withholding or minimizing women's sentences after conviction. For these conditions to be used as a mitigating factor, the disorder must have been undiagnosed when the criminal act occurred but been diagnosed since by a qualified health care professional.

Illinois's second Perinatal Mental Health Disorders Prevention and Treatment Act, enacted in 2008 and amended in 2015 and 2018, strives to create a safety net by requiring several state agencies to develop educational materials for women and their families and conduct assessments for perinatal mental health conditions during prenatal and postnatal visits.

Under the law, [health professionals](#) that provide prenatal services as well as hospitals that provide labor and delivery services are required to inform women and their family members about the symptoms of perinatal mental health disorders. Likewise, clinicians are required to invite women to undergo screenings during prenatal and postnatal visits and at well-baby checkups.

When these screenings indicate that patients may be experiencing [mental health problems](#), based on clinicians' medical judgment, they are required to administer further assessments.

Illinois's other notable policy effort in this area is the Maternal Mental Health Conditions Education, Early Diagnosis and Treatment Act,

enacted in 2020 to raise awareness about the risk factors, signs, symptoms and treatment options. Under this law, the Illinois Department of Human Services is required to develop [educational materials](#) for health professionals and patients, and hospitals are required to use them in employee training.

Likewise, a 2023 legislative directive requires the Illinois Department of Public Health to work with the state chapter of the American Academy of Pediatrics to encourage physicians to conduct postpartum mental health screenings at well-baby visits.

Prior studies of Illinois residents found significant disparities among racial minorities and low-income populations, with higher rates of [depressive symptoms](#) and suicidal ideations in these groups.

In April 2021, Illinois became the first state to expand Medicaid coverage from 60 days to the first year postpartum. Governor J.B. Pritzker hailed the expansion as part of his administration's efforts to "reduce health disparities in communities across the state and improve maternal health outcomes for women of color."

Illinois legislators have been instrumental in advancing federal policies focused on maternal mental health, according to the study. U.S. Senator Dick Durbin and U.S. Representative Bobby Rush co-sponsored a bill—language from which was incorporated into the Patient Protection and Affordable Care Act—that increased funding for research and programs on perinatal depression and psychosis.

"These legislative efforts are great strides forward in raising awareness of perinatal mental health problems and helping women who are experiencing them access treatment," Tabb said. "However, far too many of these conditions are still going undetected and untreated. And that has long-term negative implications not only for [women](#), but their infants,

partners and other family members as well."

More information: Karen M. Tabb et al, State legislation and policies to improve perinatal mental health: a policy review and analysis of the state of Illinois, *Frontiers in Psychiatry* (2024). [DOI: 10.3389/fpsy.2024.1347382](https://doi.org/10.3389/fpsy.2024.1347382)

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