

House Bill 1068

By: Representatives Kaiser of the 59th, Beverly of the 143rd, Clark of the 101st, Gardner of the 57th, and Thomas of the 39th

A BILL TO BE ENTITLED
AN ACT

1 To amend Title 31 of the Official Code of Georgia Annotated, relating to health, so as to
2 provide for postpartum depression counseling, screening, and treatment referral; to provide
3 for duty for certain medical professionals to counsel; to provide for treatment and
4 hospitalization for postpartum depression; to provide for records; to provide a short title; to
5 provide legislative findings; to provide for related matters; to repeal conflicting laws; and for
6 other purposes.

7 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

8 **SECTION 1.**

9 The General Assembly makes the following findings:

10 (1) Pregnancy related mood and affective disorder, known as postpartum depression and
11 postpartum psychosis, is a significant health issue. The World Health Organization
12 prioritized maternal health in its Millennium Development Goals, recognizing that mental
13 illness is one of the leading noncommunicable diseases globally. Healthy People 2020,
14 sponsored by the U.S. Department of Health and Human Services, noted the incidence
15 of depression among pregnant women can be reduced and indicated that the role of the
16 legislature to compel screening of mothers at birth and six weeks postpartum serves as
17 an appropriate means to address this objective. Similar legislation has been enacted in
18 Illinois, New Jersey, New York, and Virginia and has been introduced in Pennsylvania.
19 (2) More than two-thirds of mothers who deliver babies in the United States reported
20 pregnancy related mood disturbance following birth. Most episodes were self-limiting
21 and resolved within two to four weeks postpartum, requiring no formal mental health
22 treatment. However, for approximately 25 percent of mothers, marked mood and
23 affective disturbance persisted and met the medical criteria of depression or psychosis.
24 The risk to mothers included depression, anxiety, failure to provide for activities of daily
25 living, delusions, self harm, a suicidal ideation; and to infants and young children, poor

26 maternal attachment, abuse and neglect, and infanticide and homicide in more severe
27 cases.

28 (3) The American Psychiatric Association and American College of Obstetricians and
29 Gynecologists have long recognized the intersection between pregnancy, postpartum
30 health, and mental illness, especially in mothers with no history of clinical mental illness.
31 Furthermore, most postpartum depression and psychosis responds favorably to
32 appropriate treatment. If not treated, however, it will persist, resulting in debilitating
33 mental illness.

34 (4) The American Academy of Pediatrics and the American Board of Family Medicine
35 recognize the correlation of early maternal attachment and bonding to child development,
36 cognition, and regulatory behaviors, and as well, the risk of child abuse and neglect
37 which is increased when a mother is severely impaired due to postpartum depression or
38 postpartum psychosis.

39 **SECTION 2.**

40 This chapter shall be known and may be cited as the "Postpartum Depression Act."

41 **SECTION 3.**

42 Title 31 of the Official Code of Georgia Annotated, relating to health, is amended by adding
43 a new chapter to read as follows:

44 "CHAPTER 9C

45 31-9C-1.

46 (a) Physicians, certified midwives, and other licensed health care professionals providing
47 prenatal and postnatal care to mothers shall counsel and provide information regarding
48 postpartum depression, postpartum psychosis, and the subsequent impact on maternal and
49 child health to all mothers who deliver in hospitals and birthing centers in this state, prior
50 to discharge.

51 (b) At a minimum, physicians, certified midwives, and other licensed health care
52 professionals providing postnatal care to mothers shall provide a mother with a fact sheet
53 that includes common symptoms of postpartum depression and postpartum psychosis, as
54 well as emotional trauma associated with pregnancy. The fact sheet shall include the
55 subsequent impact on maternal attachment, bonding, and potential for neonatal and self
56 harm as a result of untreated pregnancy related mood disturbance.

57 31-9C-2.

58 (a) Physicians, certified midwives, and other licensed health care professionals providing
59 postnatal care to mothers shall screen new mothers for postpartum depression symptoms
60 using the Edinburgh Postnatal Depression Scale, prior to discharge from the birthing
61 facility and at the first postnatal followup visits.

62 (b) If a mother's baseline score on the Edinburgh Postnatal Depression Scale indicates
63 possible pregnancy related mood disturbance by a score of 10 or higher, physicians,
64 certified midwives, and other licensed health care professionals providing postnatal care
65 to the mother shall:

66 (1) Provide resources to appropriate counseling and psychiatric treatment providers;

67 (2) Refer mothers to appropriate counseling and psychiatric treatment providers; or

68 (3) Refer mothers to appropriate emergency psychiatric evaluation and treatment,
69 including, and up to, involuntary mental health placement if the mother presents with
70 acute suicidal or homicidal ideation, pursuant to Article 3 of Chapter 3 of Title 37.

71 (c) Screening results and subsequent referrals for mental health counsel, psychiatric
72 outpatient, or emergency inpatient care pursuant to this Code section shall be recorded in
73 a mother's health record for a period of no less than three years.

74 31-9C-3.

75 Treatment for postpartum depression and postpartum psychosis may be taken into
76 consideration as a mitigating factor in a child protection action or child custody petitions
77 absent marked abuse or neglect by the mother at the discretion of a judge.

78 31-9C-4.

79 Nothing in this chapter shall be construed as requiring a mother to receive treatment or
80 further psychological evaluation for postpartum depression or to submit to voluntary
81 inpatient hospitalization."

82 **SECTION 4.**

83 All laws and parts of laws in conflict with this Act are repealed.