

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

**Course Name:**

**Topics: Perinatal and Postpartum Mental Health, Identity, and Social Work Practice**

**SPRING 2026**

**SWK 6007**

**Instructor Name**

**Email**

**Phone**

**Office Hours:**

**COURSE DESCRIPTION**

This course introduces students to the multifaceted experiences of the perinatal and postpartum period through the lens of social work theory, ethics, and practice. Students will examine how identity, culture, and systemic factors influence the transition to parenthood and shape both individual and family well-being. The course explores the intersection of mental health, physical health, and social determinants, emphasizing the structural inequities that affect birthing people and families. Using trauma-informed, culturally responsive, and evidence-based approaches, students will analyze perinatal and postpartum experiences within clinical, community, and policy contexts. Particular attention is given to the social worker's role in assessment, intervention, advocacy, and program development to advance equity and holistic care across diverse populations.

**SOCIAL WORK COMPETENCIES**

The Council on Social Work Education requires all accredited schools of social work to assess nine competencies. This course will help students achieve the following competencies:

**Competency 1: Demonstrate Ethical and Professional Behavior**

Social workers make ethical decisions by applying the NASW Code of Ethics, relevant laws, and ethical decision-making models. They use reflection and self-regulation to manage personal values and maintain professionalism. Social workers also demonstrate professional demeanor, engage in lifelong learning, and use technology ethically and appropriately.

In this course: Students apply ethical decision-making in perinatal and postpartum contexts, including confidentiality, informed consent, and advocacy for equitable care.

## **Competency 2: Engage Diversity and Difference in Practice**

Social workers understand how diversity and difference shape human experiences and identity formation. They recognize structural oppression and privilege, apply cultural humility, and advance human rights through inclusive practice.

In this course, Students critically explore how race, gender, culture, and identity intersect in maternal health and develop culturally responsive assessment and intervention strategies.

## **Competency 3: Advance Human Rights and Social, Racial, Economic, and Environmental Justice**

Social workers advocate for human rights and work to end systemic oppression. They engage in practices that promote social, racial, and economic justice at all levels of practice.

In this course, students analyze how systemic racism, health inequities, and policy barriers impact perinatal outcomes and propose justice-based advocacy strategies.

## **Competency 4: Engage in Practice-Informed Research and Research-Informed Practice**

Social workers use practice experience to inform research, employ critical thinking in evaluating research, and apply evidence-based interventions.

In this course, Students evaluate current research on perinatal mood and anxiety disorders (PMADs), trauma-informed care, and community-based interventions, applying these findings to social work practice.

## **Competency 5: Engage in Policy Practice**

Social workers engage in policy practice to advance human rights and social, economic, and environmental justice. They understand how policies impact service delivery and advocate for policy change.

In this course, students examine maternal health policy (e.g., the Momnibus Act), develop advocacy briefs, and create culturally responsive program proposals to address disparities.

## **Competency 6: Engage with Individuals, Families, Groups, Organizations, and Communities**

Social workers use empathy, interpersonal skills, and engagement techniques to build trust and collaboration with diverse clients and systems.

In this course, students practice engagement skills in perinatal care contexts, building rapport with birthing people, partners, and families to enhance trust and support.

### **Competency 7: Assess Individuals, Families, Groups, Organizations, and Communities**

Social workers collect, organize, and interpret client data, applying critical thinking and cultural humility to assessment.

In this course, students use evidence-based tools (e.g., EPDS, PHQ-9) and ecological frameworks to assess perinatal mental health while accounting for sociocultural and systemic factors.

### **Competency 8: Intervene with Individuals, Families, Groups, Organizations, and Communities**

Social workers implement culturally and contextually appropriate interventions informed by evidence, client preferences, and professional judgment.

In this course, students apply trauma-informed, cognitive-behavioral, interpersonal, and community-based interventions to support birthing individuals and families.

### **Competency 9: Evaluate Practice with Individuals, Families, Groups, Organizations, and Communities**

Social workers use research-informed methods to evaluate practice effectiveness and improve service delivery.

In this course, students design evaluation plans to measure the impact of interventions and programs addressing perinatal mental health and family well-being.

## **Learning Objectives**

At the conclusion of this 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. This class includes 37.5 contact hours. Students will be in class live online with the professor for 2 hours each week for 14 weeks and will complete an additional 9.5 hours throughout the semester via assignments, including discussion posts.

## **Course Expectations and Grading**

Case Study Analysis (40%) – Week 2–8

Policy/Program/Termination Plan (35%) – Week 10–14

Participation & Weekly Discussion (15%)

Attendance (10%)

## **Recommended Texts for the Course**

Carmon, I. (2025). *Unbearable: Five women and the perils of pregnancy in America*.

Atria/One Signal Publishers. ISBN13: 9781668032602. Retail price: \$30.

Rainford, M. (2023). *Pregnant while Black: Advancing justice for maternal health in*

*America*. Broadleaf Books. ISBN: 9781506487618. Retail price: \$26.99

## **Course Requirements**

Assignments:

### **Case Analysis (40%)**

*Weeks 2–8*

The Case Analysis will focus on the creation and analysis of a fictional client experiencing a Perinatal Mood and Anxiety Disorder (PMAD). Students will apply DSM-5-TR diagnostic criteria, select theoretical frameworks, propose culturally responsive interventions, and address ethical considerations. Each weekly submission builds toward a final 6–8-page paper.

### **Assignment Breakdown:**

#### **Week 2: Topic & Client Proposal (5%)**

Submit a 1–2 paragraph fictional client profile (½ page). Instructor feedback will guide the project's scope.

#### **Week 3: Biopsychosocial & Contextual Background (5%)**

Submit a 1–2-page biopsychosocial history including risk and protective factors.

#### **Week 4: Assessment & Diagnostic Criteria (10%)**

Submit a 2-page section applying DSM-5-TR criteria and identifying one PMAD diagnosis. Integrate at least one validated screening tool (e.g., EPDS, PHQ-9, GAD-7).

#### **Week 5: Theoretical Framework (5%)**

Submit a 1-page section identifying and explaining one theory of change (e.g., ecological systems theory, CBT, trauma-informed practice). Connect the theory to your client's presentation and assessment.

#### **Week 6: Intervention Plan (5%)**

Submit a 1–2-page section proposing at least two evidence-based, culturally responsive interventions and identifying delivery methods.

#### **Week 7: Ethics & Evaluation (5%)**

Submit a 1-page section identifying two ethical concerns and proposing an evaluation strategy aligned with the NASW Code of Ethics.

#### **Week 8: Midterm Paper Submission (10%)**

Submit a full 6–8-page Case Analysis Paper integrating all prior components. APA 7th edition formatting and at least five scholarly references are required.

## **Break Week**

### *Week 9*

No new assignments due. Students are encouraged to use this time for feedback review, revisions, and preparation for the final project.

## **Policy Brief (35%)**

### *Weeks 10–14*

The Policy Brief combines policy analysis and program design. Students will examine maternal mental health policy through a social work lens, propose policy recommendations, and develop a culturally responsive program or intervention to address disparities. Each week includes a slide limit to keep presentations clear and focused.

### **Assignment Breakdown:**

#### **Week 10: Policy Selection & Background (5%)**

Submit policy choice proposal and rationale, identifying the policy name, scope, and target population.

**Slide limit:** 1–2 slides (outline format).

#### **Week 11: Policy Analysis (10%)**

Submit a 2–3 page written policy analysis of provisions, strengths, and limitations.

**Slide limit:** 2–3 slides summarizing findings.

#### **Week 12: Policy Brief Draft (5%)**

Submit a draft of the full 6–8 page Policy Brief for feedback.

**Slide limit:** 3–5 slides (draft outline of presentation).

#### **Week 13: Program Proposal Draft (5%)**

Submit draft PowerPoint slides (6–8 slides) including theoretical foundation, program design, cultural responsiveness, and evaluation plan.

#### **Week 14: Final Submission & Presentations (10%)**

Submit final Policy Brief and Program Proposal. Deliver a **10–12 slide presentation** and a 10–12 minute oral presentation with peer engagement and Q&A.

**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 enrolled in this course who will request documented disability-related accommodations should make an appointment with the Office of Disability Services at [Wilfods@yu.edu](mailto: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](http://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](mailto:gross@yu.edu) or [ereserves@yu.edu](mailto:ereserves@yu.edu).

## FROM OFF-CAMPUS

1. Go to the library's online resources page:  
[http://www.yu.edu/libraries/online\\_resources.asp](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](mailto:gross@yu.edu) or [ereserves@yu.edu](mailto: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](http://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 will also 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](http://www.grammarly.com/plagiarism_checker)  
[www.dustball.com/cs/plagiarism.checker](http://www.dustball.com/cs/plagiarism.checker)



[www.plagtracker.com](http://www.plagtracker.com)  
[www.plagium.com/](http://www.plagium.com/)  
[www.plagscan.com/seesources/](http://www.plagscan.com/seesources/)  
[www.duplihecker.com/](http://www.duplihecker.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, you must understand that any case information you present in class or coursework will need to be de-identified. This means that any information that would allow another person 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 comply 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.

## **COURSE OUTLINE**

### **Unit I. Ethics, Values, and Maternal Mental Health**

#### **Week 1 (Session 1): Social Work Values and Maternal Health Practice**

- **Objectives Covered:** 1
  - **Themes:** Ethics, stigma, cultural humility in maternal health.
  - **Required Readings:**
    - NASW Code of Ethics (2021).
    - NABSW Code of Ethics.
    - Thi, L. M., Manzano, A., Ha, B. T. T., Vui, L. T., Quynh-Chi, N. T., Duong, D. T. T., ... & Trang, D. T. H. (2024). Mental health stigma and health-seeking behaviors amongst pregnant women in Vietnam: A mixed-method realist study. *International Journal for Equity in Health*, 23(1), 163.
  - **Recommended:**
    - Dunleavy, D. J. (2025). The limitations of common morality as a guide for social work practice. *International Journal of Social Work Values and Ethics*, 22(1), 10-26.
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### **Unit II. Trauma-Informed Foundations**

#### **Week 2 (Session 2): Trauma, Maternal Health, and Intergenerational Impact**

- **Required Readings:**
    - Jeličić, L., Veselinović, A., Ćirović, M., Jakovljević, V., Raičević, S., & Subotić, M. (2022). Maternal distress during pregnancy and the postpartum period: Underlying mechanisms and child's developmental outcomes—a narrative review. *International Journal of Molecular Sciences*, 23(22), 13932.
  - **Recommended:**
    - Paudel, N. (2021). Person-centered and trauma-informed approach in social work. *Asian Social Work Journal*, 6(5), 21–24.
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### **Unit III. Clinical Presentations and Assessment**

#### **Weeks 3–7 (Sessions 3–7): Theories, Assessment, and Screening**

##### **Week 3: DSM-5-TR, PMADs overview; Baby blues vs depression.**

- Sidebottom, A., Vacquier, M., LaRusso, E., Erickson, D., & Hardeman, R. (2021). Perinatal depression screening practices in an extensive health

system: identifying current state and assessing opportunities to provide more equitable care. *Archives of Women's Mental Health*, 24(1), 133-144.

**Week 4:** Social & structural determinants (racism, poverty, inequity).

- Jean-Francois, B., Bailey Lash, T., Dagher, R. K., Green Parker, M. C., Han, S. B., & Lewis Johnson, T. (2021). The potential for health information technology tools to reduce racial disparities in maternal morbidity and mortality. *Journal of Women's Health*, 30(2), 274-279.

**Week 5:** Depression & anxiety; Screening tools (EPDS, PHQ-9, GAD-7).

- Bhat, A., Nanda, A., Murphy, L., Ball, A. L., Fortney, J., & Katon, J. (2022). A systematic review of screening for perinatal depression and anxiety in community-based settings. *Archives of Women's Mental Health*, 25(1), 33-49.
- Moyer, S. W., & Kinser, P. (2024). *EPDS-US*. [https://scholarscompass.vcu.edu/cgi/viewcontent.cgi?article=1035&context=nursing\\_pubs](https://scholarscompass.vcu.edu/cgi/viewcontent.cgi?article=1035&context=nursing_pubs)

**Week 6:** Postpartum psychosis & bipolar disorder.

- Toor, R., Wiese, M., Croicu, C., & Bhat, A. (2024). Postpartum psychosis: A preventable psychiatric emergency. *Focus*, 22(1), 44-52.

**Week 7:** Assessment workshop (Case Analysis Due)

- Vigod, S. N., Frey, B. N., Clark, C. T., Grigoriadis, S., Barker, L. C., Brown, H. K., ... & Van Lieshout, R. J. (2025). Canadian Network for Mood and Anxiety Treatments 2024 clinical practice guideline for the management of perinatal mood, anxiety, and related disorders: Guide de pratique 2024 du Canadian Network for Mood and Anxiety Treatments pour le traitement des troubles de l'humeur, des troubles anxieux et des troubles connexes perinataux. *The Canadian Journal of Psychiatry*, 70(6), 429-489.

• **Recommended Readings:**

- Hirshler, Y., Gemmill, A. W., & Milgrom, J. (2021). An Australian perspective on treating perinatal depression and anxiety: A brief review of efficacy and evidence-based practice in screening, psychosocial assessment and management. *Annali dell'Istituto Superiore di Sanità*, 57(1), 40-50.

## Unit IV. Interventions

### Weeks 8–10 (Sessions 8–10): Therapeutic and Family Interventions

**Week 8:** CBT, IPT, group therapy.

- Oral, M., & Tuncay, T. (2021). Effectiveness of group interpersonal psychotherapy among women with major depression in Turkey. *International Journal of Group Psychotherapy*, 71(1), 180-202.
- Pettman, D., O'Mahen, H., Blomberg, O., Svanberg, A. S., von Essen, L., & Woodford, J. (2023). Effectiveness of cognitive behavioural therapy-based interventions for maternal perinatal depression: A systematic review and meta-analysis. *BMC Psychiatry*, 23(1), 208.

**Week 9:** Pharmacological and alternative approaches.

- Kittel-Schneider, S., Felice, E., Buhagiar, R., Lambregtse-Van Den Berg, M., Wilson, C. A., Banjac Baljak, V., ... & Lupattelli, A. (2022). Treatment of peripartum depression with antidepressants and other psychotropic medications: A synthesis of clinical practice guidelines in Europe. *International Journal of Environmental Research and Public Health*, 19(4), 1973.

**Week 10:** Fathers, partners, family systems.

- Czerwiak, K. Z., Cyrkler, M., Drabik, A., & Soroka, E. (2024). Understanding and addressing male postpartum depression: Incidence, causes, diagnosis, and management strategies. *Medical Science Monitor: International Medical Journal of Experimental and Clinical Research*, 30, e945482.

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## Unit V. Trauma, Loss, Policy, and Termination

### Weeks 11–13 (Sessions 11–13): Trauma, Policy, Program Development

**Week 11:** Perinatal loss, grief, NICU trauma.

- Cuenca, D. (2023). Pregnancy loss: Consequences for mental health. *Frontiers in Global Women's Health*, 3, 1032212.

**Week 12:** Policy & advocacy (Mominibus Act).

- Anyanwu, E. C., Maduka, C. P., Ayo-Farai, O., Okongwu, C. C., & Daraojimba, A. I. (2024). Maternal and child health policy: A global review of

current practices and future directions. *World Journal of Advanced Research and Reviews*, 21(2), 1770-1781.

**Week 13:** Program development, community doulas, and termination (Final Paper Due).

- Thomas, M. P., Ammann, G., Onyebeke, C., Gomez, T. K., Lobis, S., Li, W., & Huynh, M. (2023). Birth equity on the front lines: Impact of a community-based doula program in Brooklyn, NY. *Birth*, 50(1), 138-150.

## **Unit VI. Integration**

### **Week 14 (Session 14): Student Presentations & Wrap-Up**

- **Objectives Covered:** All
- **Themes:** Integration of clinical, policy, and advocacy.
- **Activities:** Final project presentations; peer feedback; reflective course closure.