



MATERNAL MENTAL HEALTH NOW
supporting the well-being of growing families

A project of Community Partners,
a 501(c)3 organization.

FREE EVENT*

4-PART VIRTUAL CONFERENCE

APR 30 | MAY 7, 14 and 21



**2021 PERINATAL MENTAL
HEALTH CONFERENCE FOR
BLACK BIRTH WORKERS,
CLINICIANS & PROVIDERS**

*This conference is offered free of charge to Black and/or Black-identifying Birth Workers, Clinicians and Providers primarily serving families in Los Angeles County.



This project is funded in part by L.A. Care Health Plan and will benefit low-income and uninsured residents of Los Angeles County.

We are thrilled to announce a groundbreaking conference for Black and Black-identifying birth workers, providers and clinicians in the Los Angeles County area.

Our Improving Outcomes project aims at addressing Black maternal mortality rates and has yielded our Safe and Sacred Pregnancy circles and multiple implicit bias trainings at local partnering hospitals and clinics over the past few years. We now aim to bring education to the community at large through this offering.

This conference training is approved by PSI for PMH-C prerequisite. This event is also approved for CE credit and pending approval for CME credit. Please review page 24 for full accreditation details.

REGISTER AT*:

www.maternalmentalhealthnow.org/bbw-conference

This conference is offered free of charge to Black and/or Black-identifying Birth Workers, Clinicians and Providers primarily serving families in Los Angeles County. This project is funded in part by L.A. Care Health Plan and will benefit low-income and uninsured residents of Los Angeles County. *Please note, your ticket registration includes your commitment to attend all 4 conference days.*

TABLE OF CONTENTS:

About	4
Daily Schedules	6
Descriptions & Objectives	10
Speaker Bios	19
Accreditation	24

ABOUT

MISSION:

To increase the capacity and competency of Black clinicians and providers in LA County.

GOAL:

Black families will find specialized perinatal providers who look like them and with whom they can relate.

We will present foundational knowledge on perinatal mental health care while centering the Black experience. We will assist the community in building concrete skills and tools to more adequately address the mental health needs of Black women and birthing people and aim to address this specifically within the Los Angeles County area.

THANK YOU!

Thank you to our planning committee at Maternal Mental Health NOW and the staff at iD.R.E.A.M. for Racial Health Equity for your contributions in creating this conference.

Target Audience

This live virtual conference is tailored for Black-identifying health care professionals including therapists, clinical psychologists, social workers, community health workers, counselors, nurses (neonatal, labor and delivery, maternity, NICU), midwives, nurse practitioners, physicians (psychiatrists, OB/GYNs, pediatricians, neonatologists, family practitioners, general practitioners, primary care physicians), lactation consultants, health educators, doulas & home visitors.

Cancellation & Grievance

If you need to cancel your registration, please do so as soon as you confirm that you cannot make it so that we may offer your spot to another attendee. If you experience any issues or have questions please contact us at info@maternalmentalhealthnow.org.

Conflict of Interest

Speakers are paid an honorarium for their time. There are no other known commercial interests affiliated with conference speakers.

Disabilities

We strive to host inclusive, accessible events that enable all individuals, including individuals with disabilities, to engage fully. To request an accommodation or for inquiries about accessibility, please contact info@maternalmentalhealthnow.org.

Community Partners FBO Maternal Mental Health NOW will be recording the speakers, presentations and discussions throughout this event. We hereby provide notice that, as an attendee of this event, your likeness and voice may be captured by such recording.

Through your attendance at the event, you grant Community Partners FBO Maternal Mental Health NOW the right to said recordings and to sell or distribute any of the recordings and any derivative works in any medium or form throughout the world and to use them for advertising, promotion or any other lawful purpose.

You agree that Community Partners FBO of Maternal Mental Health NOW does not have to get your approval of any of the photos or videos before using them.

FRIDAY | APRIL 30, 2021

DAY 1

9:00 AM - 9:10 AM

WELCOME

Wenonah Valentine, MBA

9:10 AM - 9:15 AM

INTRODUCTIONS AND LOGISTICS

Anna King, LCSW, PMH-C

9:15 AM - 9:45 AM

PERINATAL MOOD AND ANXIETY DISORDERS (PMADS) FROM A COMMUNITY PERSPECTIVE

Erica Melbourne, PsyD

9:45 AM - 10:45 AM

BEYOND THE BLUES: PERINATAL MOOD AND ANXIETY DISORDERS (PMADS)

Anna King, LCSW, PMH-C

10:45 AM - 11:00 AM

Break

11:00 AM - 11:30 AM

ATTACHMENT, NEUROBIOLOGY & PREVENTION IN PMADS

Nakeisha Robinson, LMFT

11:45 AM - 12:30 PM

STORYTELLING, REFLECTION AND INTEGRATION

Meridith A. Merchant, PhD

*Schedule subject to change.

FRIDAY | MAY 7, 2021

DAY 2

9:00 AM - 9:10 AM

**WELCOME, INTRODUCTIONS
AND LOGISTICS**

Meridith A. Merchant, PhD

9:10 AM - 10:00 AM

**TIPS FOR SCREENING AND ASSESSMENT
OF PMADS**

Anna King, LCSW, PMH-C

10:00 AM - 10:45 AM

**AFFIRMING SUPPORT FOR BLACK
QUEER, TRANS & GENDER DIVERSE
BIRTHING PEOPLE**

king yaa

10:45 AM - 11:00 AM

Break

11:00 AM - 11:45 AM

**GIFTS + WOUNDS OF A BIRTHING
PARENT'S WOMB**

Katrina Long, LCSW, CYT

11:45 AM - 12:30 PM

**RADICAL INCLUSIVITY: HONORING
OUR KINFOLX**

Arisika Razak, CNM, MPH

*Schedule subject to change.

FRIDAY | MAY 14, 2021

DAY 3

9:00 AM - 9:15 AM

**WELCOME, INTRODUCTIONS
AND LOGISTICS**

Anna King, LCSW, PMH-C

9:15 AM - 10:00 AM

**UNDERSTANDING THE PSYCHOLOGY
OF PREGNANCY AND FERTILITY**

Marissa Long, PsyD

10:00 AM - 10:45 AM

Breakout Session A

**NICU, PRETERM BIRTH, INFANT LOSS
& MISCARRIAGE: CONSIDERATIONS FOR
THE BLACK BIRTHING COMMUNITY**

Marissa Long, PsyD

10:00 AM - 10:45 AM

Breakout Session B

**INTIMATE PARTNER VIOLENCE (IPV)
AND PMADS**

Nakeisha Robinson, LMFT

10:45 AM - 11:00 AM

Break

11:00 AM - 11:45 AM

PARTNERS, FATHERS & PMADS

Sheehan Fisher, PhD

11:45 AM - 12:30 PM

**STORYTELLING, REFLECTION
AND INTEGRATION**

Meridith A. Merchant, PhD

*Schedule subject to change.

FRIDAY | MAY 21, 2021

DAY 4

9:00 AM - 9:10 AM

**WELCOME, INTRODUCTIONS
AND LOGISTICS**

Meridith A. Merchant, PhD

9:10 AM - 9:45 AM

**WHERE THE RUBBER MEETS THE ROAD:
PMADS TREATMENT AND INTERVENTIONS**

Janelle Watson, LMFT, PMH-C

9:45 AM - 10:45 AM

**“I HEARD I CAN’T TAKE MEDICATION
WHEN I’M PREGNANT”: WHAT MEDICAL
PROVIDERS NEED TO KNOW ABOUT
PSYCHOTROPIC MEDICATION DURING
PREGNANCY**

Sinmi M. Bamgbose, MD

10:45 AM - 11:00 AM

Break

11:00 AM - 11:45 AM

**HOW TO LOVE A BLACK BODY:
REIMAGINING WELLNESS FOR
BLACK FOLX**

Thea Monyee’, LMFT

11:45 AM - 12:30 PM

**EMBODYING BLACK JOY: “THE BODY IS
NOT AN APOLOGY”**

Arisika Razak, CNM, MPH

*Schedule subject to change.

DESCRIPTIONS & OBJECTIVES

DAY ONE

Myths, Expectations, and Stigma Related to PMADs and Parenting in the Black community

ERICA MELBOURNE, PSYD

The presentation will review the unique challenges for underrepresented groups in accessing perinatal mental healthcare including prevalence rates as well as gaps and barriers to care.

Objectives:

- 1) Define perinatal mood disorders and review the difference in prevalence rates among underrepresented groups.
- 2) Discuss the disparities in screening/diagnosing perinatal mood disorders and how it may impact mortality rates for Black women and their newborn.

Beyond the Blues: Perinatal Mood and Anxiety Disorders (PMADs)

ANNA KING, LCSW, PMH-C

Perinatal mood and anxiety disorders (PMADs) is an umbrella term that encompasses five major diagnoses. Following a brief review of major risk factors and high-risk populations, this session will cover differential diagnosis and common symptomatology in the perinatal period.

Objectives:

- 1) Describe the difference between baby blues and perinatal depression.
- 2) Assess the difference between postpartum obsessive compulsive disorder and postpartum psychosis.
- 3) Explain 1 biological, psychological, and social risk factor for perinatal mood disorders.



Attachment, Neurobiology & Prevention in PMADs

NAKEISHA ROBINSON, LMFT

The need to feel connected is part of our genetic makeup. But how do other factors like child development, early trauma, relationship formation, stress and well-being, and perinatal mental health play into all of this? Attachment and love are not the same thing. Bonding takes time and some parents do not always feel a great rush of love and bonding right away. Many parents have other feelings such as fear paired with love while still safely and consistently caring for their baby. If this happens, there is potential for attachment issues. As culturally responsive behavioral health professionals, we are in a unique position to contribute to the efforts to support attachment and promote parenting protective capacity.

Objectives:

- 1) Describe how and why mood disorders in the perinatal period may impair maternal attachment.
- 2) Identify parental ambivalence and formulate responses to associated shame and stigma.

Storytelling, Reflection, and Integration

MERIDITH A. MERCHANT, PHD

Dr. Meredith will share parts of her personal story and then lead participants in an experiential reflective activity. The goal will be to provide an opportunity for attendees to reflect on and increase awareness of their own experiences. Through this reflective process, participants may accelerate their personal healing and/or reconnect with their own strength and power to foster greater understanding, improved healing-centered engagement, and increased activism with and for those they serve.

DAY TWO

Tips for Screening and Assessment of PMADs

ANNA KING, LCSW, PMH-C

Learn the basics of how to screen and assess for perinatal mental health risk factors and signs of perinatal mood and anxiety disorders (PMADs). This discussion will focus on commonly utilized screening tools, recommended screening intervals, and cultural considerations while administering screening tools. Strategies for strengthening virtual confidentiality while screening will be addressed as well.

Objectives:

- 1) Describe 3 commonly used screening tools when assessing for perinatal mental health.
- 2) Assess for suicidal ideation and potential risk for self-harm.

Affirming Support for Black Queer, Trans & Gender Diverse Birthing People

king yaa

Do you know that not all birthing people are women? More and more trans and non-binary people who have a uterus are using their bodies to get pregnant and build families. king yaa (pronouns: they, them, king!) is a queer reproductive justice advocate who will share some of the obstacles that sexual and gender diverse birthing people experience in reproductive spaces and offer useful and tangible ways that intentional birthworkers, providers and clinicians can create safer spaces that honour the intersections of Black, queer and gender diverse identities for optimal perinatal mental health.

Objectives:

- 1) Explore obstacles that many queer, trans and gender diverse people experience in reproductive spaces.
- 2) Identify what it means to be an affirming provider.
- 3) Examine 5 useful and tangible ways to support sexual & gender diverse birthing people.

Gifts + Wounds of a Birthing Parent's Womb

KATRINA LONG, LCSW, CYT

Mental health and trauma have an impact on the health and wellness of birthing individuals and the children they carry. This session will cover a brief description of trauma and its impact, transmission of mental and emotional distress and trauma during pregnancy, and provide tools for trauma-informed care from a culturally responsive lens.

- 1) Define trauma and describe its impact on birthing bodies, pregnancy and infants.
- 2) Explain how trauma and mental health issues are transmitted during pregnancy.
- 3) Describe ACEs and considerations for trauma-informed care.

Radical Inclusivity: Honoring Our Kinfox

ARISIKA RAZAK, CNM, MPH

This experiential workshop will include: guided meditation, movement meditation, silent practice, writing, lecture-demonstrations, music videos, small and large group sharing, and non-denominational ancestral praxis to help participants identify and acknowledge 1) the diversity of the Black/African Diasporic community; 2) ancestral healing technologies; 3) creative practices to encourage resilience; 4) valuation of the Black Body.

DAY THREE

Understanding the Psychology of Pregnancy and Fertility

MARISSA LONG, PSYD

This keynote will address the psychology of pregnancy and fertility while highlighting the impact of socialized training to conceive, carry and birth with joy. Providers will learn to understand the ways in which their work saves lives. Disenfranchisement of the birth and loss experience for the Black community is evident, and Dr. Long will address how care providers act as pivotal agents in protecting Black bodies and Black families.

Objectives:

- 1) Discuss the realities and myths around conception, pregnancy, and birth within the Black community, including historical and generational experiences.
- 2) Identify at least 2 ways providers can work to educate, promote health, and prevent loss in the Black community.
- 3) Describe mental illness across multiple scenarios and settings related to pregnancy and fertility.

NICU, Preterm birth, Infant Loss, & Miscarriage: Considerations for the Black Birthing Community

MARISSA LONG, PSYD

This breakout session will dive more deeply into the experiences of Black women and families navigating at-risk pregnancies, births, and infants. Dr. Long will guide attendees through exploring ways that providers improve the outcomes of an already difficult experience, and discuss ways to create space for disenfranchised grief commonly experienced by those experiencing perinatal loss.

Objectives:

- 1) Identify 2 ways to engage with a Black family experiencing perinatal loss utilizing empathy and humility.
- 2) Identify signs of vicarious trauma and 1 self-care practice to combat its progression.

Intimate Partner Violence (IPV) and PMADs

NAKEISHA ROBINSON, LMFT

Intimate Partner Violence (IPV) is a pattern of assaultive and coercive behaviors that may include inflicted physical injury, psychological abuse, progressive social isolation, deprivation, sexual assault, stalking, intimidation, and threats. These behaviors are perpetrated by someone who is, was or wishes to be involved in an intimate or dating relationship with another person, and are aimed at establishing control by one partner over another. In addition to physical and/or emotional injuries sustained by victims, abuse is linked to increased risk for perinatal mood and anxiety disorders and pregnancy complications.

Objectives:

- 1) Define intimate partner violence (IPV) and identify special considerations in screening, assessment, and intervention strategies.
- 2) Discuss and appreciate the function of the multidisciplinary team and the role of each of its members.

Partners, Fathers & PMADs

SHEEHAN FISHER, PHD

The workshop will focus on providing education on the rates of depression in fathers, how PMADs manifest differently in men, contributing factors to their risk of PMADs, and how their PMADs affect the family health and functioning. The workshop will also cover how to utilize fathers and partners to support maternal mental health.

Objectives:

- 1) Describe the rates of mental health disorders in fathers, how PMADS manifest differently in men, and how this impacts their functioning and well-being.
- 2) Identify the ways PMADS in fathers can affect family health overall.

Storytelling, Reflection, and Integration

MERIDITH A. MERCHANT, PHD

Dr. Meridith will continue to share her personal story and again lead participants in an experiential reflective activity. The goal will be to provide an opportunity for attendees to reflect on and increase awareness of their own experiences. Through this reflective process, participants may accelerate their personal healing and/or reconnect with their own strength and power to foster greater understanding, improved healing-centered engagement, and increased activism with and for those they serve.

DAY FOUR

Where the Rubber Meets the Road: PMADS Treatment and Interventions

JANELLE WATSON, LMFT, PMH-C

During this presentation, engaging clients in the perinatal period utilizing evidenced-based interventions in different modalities will be discussed. Effective safety planning that incorporates increasing support systems and identifying local resources will also be highlighted. Safety planning is not typically engaged until a safety risk presents itself, which is a common mistake made by many providers. By creating a plan in

advance, it allows the client to collaborate while at their baseline and create a more comprehensive plan.

Objectives:

- 1) Identify at least 2 ways to support clients in the perinatal period using evidenced-based interventions.
- 2) Create a more comprehensive safety plan in collaboration with clients.

“I heard I can’t take medication when I’m pregnant”: What providers need to know about psychotropic medication during pregnancy

SINMI M. BAMGBOSE, MD

Many women will experience mental illness during pregnancy, most commonly presenting as depression and anxiety. These conditions are likely to worsen during the perinatal and postpartum treatment, especially if untreated, and are also correlated with adverse outcomes for the birthing parent and child. This presentation will address the common concerns and misconceptions regarding managing psychiatric disorders during pregnancy. In addition, we will discuss ways to involve the patient, family members, and all clinical providers in the informed consent process when it comes to choosing whether to use medication during this period.

Objectives:

- 1) Describe common symptoms of perinatal mood and anxiety disorder (PMADs).
- 2) Identify existing data regarding psychotropic medications in pregnancy and postpartum and describe current best practices.
- 3) Apply at least 1 effective technique for discussing treatment of PMADs with patients, family members, and clinical providers.

How To Love A Black Body: Reimagining Wellness For Black Folx

THEA MONYEE', LMFT

This conversation will explore the difference between providing traditional westernized services to Black bodies and actively reimagining a love-centered approach to relationships between practitioners and the Black bodies they serve.

Objectives:

- 1) Utilize new language relevant to a love-centered approach to working with healing and Black bodies.
- 2) Identify opportunities to build love-centered client-practitioner relationships and develop treatment plans.

Embodying Black Joy: “The Body Is Not An Apology”

ARISIKA RAZAK, CNM, MPH

This experiential workshop will include: gentle movement, guided meditation, silent practice, writing, music videos, and small and large group sharing to enable participants to 1) connect with a variety of practices which evoke authentic joy 2) celebrate the Black body 3) identify non-denominational spiritual practices to support Black birthing families and communities.

SPEAKERS

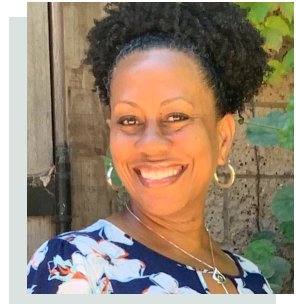


Wenonah Valentine, *MBA*

Wenonah Valentine, MBA (she/her) stands out as a cultural humility practitioner in healthcare by reframing the narrative from death and dying to healing and hope for Black birthing families. She is the founder of i.D.R.E.A.M. for Racial Health Equity, a project of Community Partners® with a social justice-led 26-year storied mission.

Meridith A. Merchant, *PhD*

Meridith A. Merchant, PhD (she/her) is an advocate, consultant, speaker, and a multicultural community trained and trauma informed licensed psychologist. Dr. Meridith's personal maternal trauma has served as fuel and inspiration for her mission to increase awareness and activism toward equity for all and the cultivation of unapologetic wholeness from the inside out.



Nakeisha Robinson, *LMFT*

Nakeisha Robinson, LMFT (she/her) is a perinatal health and mental health advocate and consultant. Her experience includes coalition building around improving the lives of birthing individuals and babies through community-based doula services, breastfeeding initiatives, and access to culturally responsive perinatal mental health support.



Sinmi Bamgbose, MD

Sinmi Bamgbose, MD (she/her) is a reproductive psychiatrist committed to expanding access to timely and cost-effective mental health care. Dr. Bamgbose obtained her medical degree at Morehouse School of Medicine and completed residency training in adult psychiatry at the University of California, San Francisco with a distinction in Women's Mental Health.



Sheehan Fisher, PhD

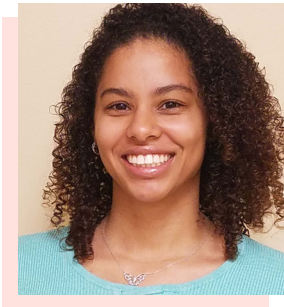
Sheehan Fisher, PhD (he/him) has had a research career focused on perinatal mental health, with a specialization in the emerging field of father mental health. His aim is to reconceptualize parental mental health research to integrally involve fathers and optimize the health and effectiveness of the parental team to positively influence children's health trajectory.



Anna King, LCSW, PMH-C

Anna King, LCSW, PMH-C (she/her) is a licensed clinical social worker and certified perinatal mental health specialist with a background in hospital social work. She currently serves as Clinical Training Specialist with Maternal Mental Health NOW where she facilitates live and virtual trainings and manages training curriculum - including this conference. She also currently serves as a part-time psychotherapist with ARC Counseling and Wellness and is a PhD student in the Integral and Transpersonal Psychology program at the California Institute of Integral Studies (CIIS).





Katrina Long, LCSW, CYT

Katrina Long (she/her) is a Holistic Healing Arts Therapist in Inglewood California, and Founder of Manifesting M.E. Wellness. She specializes in integrating traditional psychology with holistic healing modalities to help BIPOC & queer folks re-imagine healing and find relief from mental and emotional distress caused by trauma and hormonal disorders. Katrina believes in healing as an act of resistance. Her mission is to provide guidance to heal your mind, body & soul, actualize your life purpose, and manifest your dreams.

Marissa Long, MAOB, PsyD

Marissa Long, MAOB, PsyD (she/her) is the owner and Clinical Director of ARC Counseling and Wellness, a private practice in Southern California. She is an expert in supporting families at any and all points along their fertility journey. Dr. Long has also just recently launched PsychEd Book Club, an innovative book club facilitated by therapists to support mental health, self-help and social connection through conversation and education.



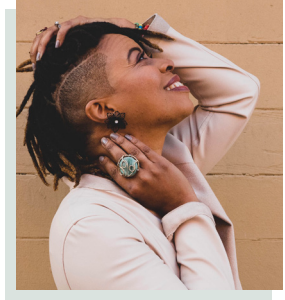
Erica Melbourne, PsyD

Dr. Erica Melbourne (she/her) is a Mental Health Training Coordinator with LA County Department of Mental Health, Service Area 6. She has worked in the field of community mental health for over 20 years specializing in the treatment of children and their families, dual diagnoses, and most recently maternal mental health.



Thea Monyeé, LMFT

Thea Monyeé, LMFT (she/her) is a licensed therapist committed to creating healing opportunities to Black/Marginalized bodies through decolonization, joy, and pleasure. In addition to appearances on HBO, OWN, FOX SOUL, and THE RED TABLE TALKS, she is the host of Shaping The Shift Podcast, founder of MarleyAyo, and The Blacker The Brain: A Mental Health Decolonizing Campaign, Conversation, & Cohort, co-host of Dem Black Mamas Podcast, and co-creator of The Free Joy Experience.



Arisika Razak, CNM, MPH

Arisika Razak, CNM, MPH (she/her) is a spiritual teacher and diversity trainer who served as an inner city midwife and health-care advocate for over 20 years. A core teacher at Oakland's East Bay Meditation Center, she has led healing and empowerment workshops, and performed as a spiritual dancer for over 30 years.



Janelle Watson, LMFT, PMH-C

Janelle Watson, LMFT, PMH-C (she/her) has been providing sexual and reproductive health clinical services and education since 2006 and earned her master's degree in Clinical Psychology in 2013. In 2017 she joined Growing Generations as a clinical specialist, providing psychological screenings for egg donors and gestational surrogates, and later created Embrace Wellness, a psychotherapy private practice.





king yaa

king yaa (always lowercase, thank you!), pronouns are they/them/king! king yaa is genderqueer/nonbinary and their sexuality is queer AF. Their Blackness is their superpower!

king is an intersectional feminist and their work centers queer, trans, and non-binary folx well-being through full spectrum support, somatic sex + pleasure coaching and gender-affirming transitioning companionship. They also train intentional health and wellness practitioners on developing the competencies to care for and to create safer and inclusive practices for queer, trans and gender diverse people.

king yaa supports folx of all gender identities, sexual orientations, and sizes to have the audacity to intentionally & unapologetically have compassion for self, in all their complexities, as a radical act of taking up space and insisting on themselves. They are invested in decolonizing health and queering up reproductive justice, as well as, the collective healing and liberation of queer, trans and nonbinary folx, especially BIPOC folx.

ACCREDITATION

CE Credit

Continuing education for Perinatal Mental Health Conference for Black Birth Workers, Clinicians and Providers is sponsored by Wellnest, formerly Los Angeles Child Guidance Clinic. Wellnest is approved

by the American Psychological Association (APA) to sponsor continuing education for psychologists.

Wellnest maintains responsibility for this program and its content. This course also meets criteria for

14 continuing education credits for LMFTs, LPCCs, LCSWs, LEPs, and psychologists through the Board

of Behavioral Sciences (BBS) in the state of CA. If you hold a license not listed here or are licensed outside of the state of California, please check with your licensing board directly to confirm that these CE credits will be accepted.



CME Credit

Pending

PMH-C Credit

This 14-hour conference training is approved by Postpartum Support International (PSI) toward the basic pre-requisite requirement for PSI's Perinatal Mental Health Certification (PMH-C) process. For more information, visit <https://www.postpartum.net/professionals/certification/>