

June 20, 2024

The Honorable Tammy Baldwin
Chairwoman, Senate Appropriations Committee
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
Room S-128, The Capitol
Washington, D.C. 20510

The Honorable Shelley Moore Capito
Ranking Member, Senate Appropriations Committee
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
Room S-128, The Capitol
Washington, D.C. 20510

The Honorable Robert Aderholt
Chair, House Appropriations Committee
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
2358-B Rayburn House Office Building
Washington, D.C. 20510

The Honorable Rosa DeLauro
Ranking Member, House Appropriations Committee
Subcommittee on Labor, Health and Human Services,
Education, and Related Agencies
2358-B Rayburn House Office Building
Washington, D.C. 20510

Dear Chairwoman Baldwin, Ranking Member Capito, Chairman Aderholt, and Ranking Member DeLauro:

We, the 47 undersigned organizations who represent and care for the health and wellness of mothers, babies, and families, are writing to request funding and provisions to address maternal mental health as the 118th Congress considers the Fiscal Year 2025 Labor, Health and Human Services, and Education Appropriations bill. In the 117th Congress, Congress passed the *Into the Light for Maternal Mental Health and Substance Use Disorders Act of 2022 (Into the Light)* within the *Consolidated Appropriations Act of 2023*. *Into the Light* reauthorized state grants to address maternal mental health and authorized the national Maternal Mental Health Hotline.

The United States is facing a maternal health crisis. According to a recent report from the Centers for Disease Control and Prevention, maternal mortality increased from 2018 to 2021 (from 658 deaths in 2018 to 1,205 deaths in 2021).¹ This follows a September 2022 report from the CDC showing that ***mental health conditions are the leading cause of maternal deaths***, and that four out of five maternal deaths were preventable.²

By investing in maternal mental health, Congress can help save the lives of mothers across the country.

Maternal mental health (MMH) conditions* are the most common complication of pregnancy and childbirth, affecting one in five pregnant women or new mothers, or 800,000 American families each year.^{3,4} Women of color and service members experience MMH conditions at nearly twice the national average, and young mothers and women of low socioeconomic status are also at higher risk of experiencing MMH

¹ Hoyert, Donna L. *Maternal Mortality Rates in the United States, 2021*. Centers for Disease Control and Prevention, US Department of Health and Human Services. 2023. <https://www.cdc.gov/nchs/data/hestat/maternal-mortality/2021/maternal-mortality-rates-2021.html>

² Trost, Susanna, Jennifer Beauregard, Gyan Chandra, Fanny Njie, Jasmine Berry, Alyssa Harvey, and David A. Goodman. *Pregnancy-Related Deaths: Data from Maternal Mortality Review Committees in 36 States, 2017 - 2019*. Centers for Disease Control and Prevention, US Department of Health and Human Services. 2022. <https://www.cdc.gov/reproductivehealth/maternal-mortality/erase-mm/data-mmrc.html>

*Maternal mental health conditions include depression, anxiety disorders, obsessive compulsive disorder, post-traumatic stress disorder, bipolar illness (including postpartum psychosis) and substance use disorders.

³ American College of Obstetricians and Gynecologists. *Screening for Perinatal Depression, ACOG Committee Opinion No. 757*. *Obstet Gynecol.* 2018;132(5):e:208-12.

⁴ Fawcett, Emily J, Nichole Fairbrother, Megan L Cox, Ian R White, and Jonathan M Fawcett. *The Prevalence of Anxiety Disorders During Pregnancy and the Postpartum Period: A Multivariate Bayesian Meta-Analysis*. *J Clin Psychiatry.* 2019;80(4):18r12527.

conditions.^{5,6,7,8}

The vast majority (75%) of women who experience MMH symptoms remain untreated, increasing the risk of long-term negative impacts on the mother, baby and family.^{9,10} When MMH conditions go untreated, women are at higher risk of suicide and overdose, which is tragically the leading cause of death for new mothers, accounting for 22% of maternal deaths.¹¹ The economic cost of not treating MMH conditions is \$32,000 per mother/infant dyad, or \$14 billion each year in addressing poor health outcomes of mother and baby, as well as lost wages, and productivity.¹²

Thus, we write to request funding at levels authorized under the *Consolidated Appropriations Act of 2023* (P.L. 117-328) for two specific programs which increase support and treatment for mothers experiencing MMH conditions.

- 1. Screening and Treatment for Maternal Mental Health and Substance Use Disorders Grant Program (MMHSUD).** The Health Resources and Services Administration implements the Screening and Treatment for Maternal Mental Health and Substance Use Disorders program, which provides grants to states to address MMH conditions. When the program was announced in 2018, thirty states and territories applied for funding, but budget limitations resulted in just seven states receiving grants. These states have created programs that both expand the workforce to address MMH conditions and provide critically needed and cost-effective services to pregnant women and new mothers suffering from MMH conditions. We thank the Committees for including an additional \$1 million in funding for FY2024 Appropriations, and we recognize a need for additional funding to support additional states. Each additional \$5 million allows for 7 state grants. *We request the highest possible funding amount in FY 2025 to support new perinatal psychiatry access programs, coordination with existing maternal and child mental health programs, and funding for programs that address disparities and substance issues for mothers.*
- 2. National Maternal Mental Health Hotline.** The Hotline, which launched on Mother's Day 2022, provides 24/7 voice and text services in both English and Spanish for individuals experiencing MMH conditions and their loved ones. Staff for the Hotline include licensed and certified healthcare or mental health providers, along with certified peer specialists. Since its inception, the Hotline has responded to over 33,000 contacts (70% calls, 30% texts) with an average answer time of less than 60 seconds. We thank the Committees for the \$7 million in funding in FY2024 Appropriations, which

⁵ Taylor, Jamila, and Christy M Gamble. *Suffering in Silence: Mood Disorders Among Pregnant and Postpartum Women of Color*. Center for American Progress, November 2019. <https://www.americanprogress.org/article/suffering-in-silence/>.

⁶ Government Accountability Office. *Defense Health Care: Prevalence of and Efforts to Screen and Treat Mental Health Conditions in Prenatal and Postpartum TRICARE Beneficiaries*. May 23, 2022. <https://www.gao.gov/products/gao-22-105136>

⁷ Agnafors, Sara, Marie Bladh, Svedin, Carl Göran Svedin, and Gunilla Sydsjö. *Mental Health in Young Mothers, Single Mothers and Their Children*. BMC Psychiatry 19, 112 (2019). <https://doi.org/10.1186/s12888-019-2082-y>

⁸ Goyal, Deepika, Caryl Gay, and Kathryn A. Lee. *How Much Does Low Socioeconomic Status Increase the Risk of Prenatal and Postpartum Depressive Symptoms in First-Time Mothers?*. February 4, 2010, DOI: 10.1016/j.whi.2009.11.003

⁹ Byatt, Nancy, Leonard L Levin, Douglas Ziedonis, Tiffany A Moore Simas, and Jeroan Allison. *Enhancing Participation in Depression Care in Outpatient Perinatal Care Settings: A Systematic Review*. *Obstet Gynecol*. 2015;126(5):619-625.

¹⁰ Field, Tiffany. *Postpartum Depression Effects on Early Interactions, Parenting, and Safety Practices: A Review*. *Infant Behavioral Health*, 2010; 33(1):1-14.

¹¹ Trost, Susanna, et al. *Pregnancy-Related Deaths: Data from Maternal Mortality Review Committees in 36 States, 2017 - 2019*. CDC.

¹² Luca, Dara Lee, Caroline Margiotta, Colleen Staatz, Eleanor Garlow, Anna Christensen, and Kara Zivin. *Financial Toll of Untreated Perinatal Mood and Anxiety Disorders Among 2017 Births in the United States*. *American Journal of Public Health*. 2022: 110, 888_896, <https://doi.org/10.2105/AJPH.2020.305619>

is critical to support new mothers in need of support and provide culturally and linguistically appropriate care. *We request an additional \$3 million, for the full \$10 million authorization in FY2025 funding for the Hotline to train hotline counselors on best practices to support the unique needs of service members, veterans, and military families utilizing the hotline, and increase coordination with the Department of Defense and Veterans Services Administration to reach more pregnant and postpartum women.*

Your support for increased resources for the Screening and Treatment for Maternal Mental Health and Substance Use Disorders Grant Program (MMHSUD) state grants and the National Maternal Mental Health Hotline will save lives and help families thrive.

If the committee has any questions about this letter of support, please contact Jamie Belsito, Director of Policy, Maternal Mental Health Leadership Alliance at jbelsito@mmhla.org

Sincerely,

Maternal Mental Health Leadership Alliance
American Academy of Pediatrics
American Counseling Association
American Occupational Therapy Association
American Psychiatric Association
Anchor Perinatal Wellness
Anxiety and Depression Association of America
Association of Maternal & Child Health Programs
California Access Coalition
California Chapter of Postpartum Support International
California Council of Community Behavioral Health Agencies
Central Jersey Family Health Consortium
Colorado PROSPER Perinatal Psychiatry Access Program and Healthy Expectations Perinatal Mental Health Program
Global Alliance for Behavioral Health and Social Justice
HealthyWomen
International OCD Foundation
Jennifer Bush-Lawson Foundation
Lifeline for Families Center and the Lifeline for Moms Program at UMass Chan Medical School
Marce of North America
March for Moms
Maternal Mental Health NOW
Moms Mental Health Initiative, Inc.
MomsRising
National Alliance on Mental Illness
National Association of Nurse Practitioners in Women's Health
National Association of Pediatric Nurse Practitioners
National Council for Mental Wellbeing
National League for Nursing
Neighborhood Health Plan of Rhode Island

Nexus Recovery Center
PEACE for Moms
Postpartum Resource Center of New York
Postpartum Support International
Postpartum Support International- South Dakota Chapter
PSI - Arizona Chapter
Rebekah N. Jensen LCSW LLC
Rooks County Health Center
Seven Starling
Shades of Blue Project
SHIELDS for Families
The Colette Louise Tisdahl Foundation
The Kennedy Forum
UnicornQueen
UVMMC
Women & Infants Hospital
Women's Therapy and Wellness
WV Perinatal Partnership, Inc.