

June 16, 2020

The Honorable Mitch McConnell  
Majority Leader  
United States Senate  
317 Russell Senate Office Building  
Washington DC 20515

The Honorable Nancy Pelosi  
Speaker of the House of Representatives  
United States House of Representatives  
1236 Longworth House Office Building  
Washington DC 20515

The Honorable Charles Schumer  
Minority Leader  
United States Senate  
322 Hart Senate Office Building  
Washington DC 20515

The Honorable Kevin McCarthy  
Minority Leader  
United States House of Representatives  
U.S. Capitol Building, Room H-204  
Washington DC 20515

Dear Leader McConnell, Leader Schumer, Speaker Pelosi, and Leader McCarthy:

We, the undersigned organizations, are writing to request additional funding for HRSA's Screening and Treatment for Maternal Depression and Related Behavior Disorders Treatment Program in the next COVID-19 stimulus package.

In normal times, 1 in 5 women are affected by anxiety, depression, and other maternal mental health (MMH) conditions during pregnancy or the year following pregnancy. ***These illnesses are the most common complication of pregnancy and childbirth, impacting 800,000 women in the United States each year.***<sup>1</sup> Sadly, MMH conditions often go undiagnosed and untreated, increasing the risk of multigenerational long-term negative impact on the mother's and child's physical, emotional, and developmental health, increasing the risk of poor health outcomes of both the mother and baby.<sup>2,3</sup> Of most concern, maternal depression can lead to suicide; in fact, recent studies show that suicide and overdose are the leading cause of death for women in the first year following pregnancy.<sup>4,5</sup> In addition to the medical affects, the cost to society is estimated at \$14.2 billion in the United States in 2017 from lost wages and productivity of the mother and addressing poor health outcomes of the baby.<sup>6</sup>

However, we are living in unprecedented times, and ***pregnant and postpartum women are experiencing unparalleled levels of stress and anxiety.*** Maternal mortality rates are at an all-time high with the United States having the highest maternal mortality rate in the developed world.<sup>7</sup> Systemic racism has erupted into significant social unrest with Black mothers fearing every day that their children might die simply because of the color of their skin. The coronavirus pandemic has opened a Pandora's box of concerns for pregnant women, who worry about how they, their pregnancies, and their infants will be affected. Moreover, ***women of color and women living in poverty are disproportionately impacted*** by the issues of maternal mortality, racism, and the coronavirus, further exacerbating the negative effects of these issues.

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<sup>1</sup> Luca, D., Garlow, N., Staatz, C., & Zivin, K. (2019). Societal Costs of Untreated Perinatal Mood and Anxiety Disorders in the United States. *Mathematica Policy Research*.

<sup>2</sup> Center for Disease Control and Prevention website. [www.cdc.gov/reproductivehealth/depression/index](http://www.cdc.gov/reproductivehealth/depression/index).

<sup>3</sup> Luca et al.

<sup>4</sup> Metz, T., et al (2016). Maternal Deaths From Suicide and Overdose in Colorado, 2004–2012. *Obstetrics Gynecol*.

<sup>5</sup> Davis N., Smoots A., Goodman D. (2019). Pregnancy-Related Deaths: Data from 14 U.S. Maternal Mortality Review Committees, 2008-2017. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services.

<sup>6</sup> Luca et al.

<sup>7</sup> Building U.S. Capacity to Review and Prevent Maternal Deaths. (2018). Report from nine maternal mortality review committees. Retrieved from [http://reviewtoaction.org/Report\\_from\\_Nine\\_MMRCs](http://reviewtoaction.org/Report_from_Nine_MMRCs).

Access to mental health care is critical to the overall health of both mothers and their newborns – more so now than ever. It has always been difficult for childbearing women experiencing anxiety or depression to access appropriate mental health care. However, the current situation – with an increase in the range and intensity of mental health issues coupled with the increased pressure on the healthcare system -- has made it even more challenging to access appropriate mental health services.

HRSA's Screening and Treatment for Maternal Depression and Related Behavior Disorders Treatment Program provides grants to states to address maternal depression, thereby helping new mothers and their babies achieve the best start possible. States receiving funding create programs that provide real-time psychiatric consultation, care coordination, and training for front-line providers to better screen, assess, refer and treat pregnant and postpartum women for depression and other behavioral health conditions. ***These programs provide a critically-needed and cost-effective lifeline to pregnant women and new mothers at the most vulnerable period in their lives.*** Massachusetts' statewide program, for example, has served over 8,700 women in five years at a cost of just \$12 per woman per year, amounting to almost \$850,000 in savings each year.

The HRSA program is currently funded at \$5 million annually. When it was introduced in FY2018, thirty states applied for funding but only seven states were awarded five-year cooperative agreements because of funding restrictions. We request including an additional \$10 million in funding for this program in the next COVID-19 response legislation. This funding would allow 12 additional states to launch programs and provide \$2 million to allow HRSA to establish a Technical Assistance Center to provide states with best practices, training, and technical assistance so they can quickly and effectively establish these programs.

Increased funding for this program will go a long way in ensuring that mothers, and their babies, have access to the care they need to thrive during these challenging times.

Thank you for your attention to this critical matter.

Sincerely,

National Organizations

2020Mom

American Association of Suicidology

American College of Nurse Midwives

American College of Obstetricians and Gynecologists

American Counseling Association

American Group Psychotherapy Association

American Psychological Association

American Medical Women's Association

Anxiety and Depression Association of America

Association for Ambulatory Behavioral Healthcare

Association of Maternal & Child Health Programs

Association of Women's Health, Obstetric, and Neonatal Nurses

Clinical Social Work Association

Depression and Bipolar Support Alliance

Eating Disorders Coalition for Research, Policy, & Action

Every Mother Counts

Global Alliance for Behavioral Health and Social Justice

Group Peer Support

Johns Hopkins University Women's Mood Disorders Center

Legal Action Center

Lifeline4Moms Center at the University of Massachusetts Medical School  
March for Moms  
March of Dimes  
Marce of North America  
Maternal Mental Health Leadership Alliance  
Mental Health America  
Mental Health America of Ohio  
MomsRising  
National Alliance on Mental Illness  
National Association for Children's Behavioral Health  
National Association of Nurse Practitioners in Women's Health  
National Federation of Families for Children's Mental Health  
National Register of Health Services Psychologists  
No Health Without Mental Health  
Postpartum Resource Center of New York  
Postpartum Support International  
Postpartum Support Virginia  
Psychotherapy Action Network  
Residential Eating Disorders Consortium  
Society for Maternal Fetal Medicine