

The Honorable Charles Schumer
Majority Leader
United States Senate
Washington DC 20515

The Honorable Nancy Pelosi
Speaker of the House of Representatives
United States House of Representatives
Washington DC 20515

The Honorable Mitch McConnell
Minority Leader
United States Senate
Washington DC 20515

The Honorable Kevin McCarthy
Minority Leader
United States House of Representatives
Washington DC 20515

September 10, 2021

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

We, the undersigned organizations who represent and care for the health and wellness of mothers and babies in our country, are writing to request funding to address maternal mental health as the 117th Congress considers the “Build Back Better” package. Pregnant and postpartum mothers are experiencing 3-4 times higher rates of anxiety and depression during the pandemic¹, and States are prepared to help them through Maternal Mental Health Psychiatric Access lines but need further funding to meet the need. Specifically, we request an additional \$40 million for HRSA’s Screening and Treatment for Maternal Depression and Related Behavior Disorders Treatment which provides grants to states to address maternal mental health through Psychiatric Access Lines. This program is the maternal counterpart to the Pediatric Mental Health Care Access Program, also administered by HRSA, which is currently funded at twice the rate of the maternal mental health program.

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.***² 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.^{3,4} Of most concern, maternal depression can lead to suicide; in fact, recent studies show that suicide and overdose combined are the leading cause of death for women in the first year following pregnancy.^{5,5} In addition to the medical effects, the cost to society is estimated at \$14.2 billion in the United States in 2017 in accounting for lost wages and productivity of the mother and addressing poor health outcomes of the mother and baby.⁶

However, we are living in unprecedented times, and ***pregnant and postpartum women are experiencing unparalleled levels of stress and anxiety.*** Studies show that pregnant women are experiencing anxiety and

¹ Lebel C., et al (2020). Elevated Depression and Anxiety Symptoms Among Pregnant Individuals During The COVID-19 Pandemic. *Journal of Affective Disorders*.

² 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*.

³ Center for Disease Control and Prevention website. www.cdc.gov/reproductivehealth/depression/index.

⁴ Luca et al.

⁵ Metz, T., et al (2016). Maternal Deaths From Suicide and Overdose in Colorado, 2004–2012. *Obstetrics Gynecol.* ⁵ 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.

⁶ Luca et al.

⁷ 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.

depression during the pandemic at 3-4 times the rate prior to the pandemic. 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. ***Women of color and women living in poverty are disproportionately impacted*** by both maternal mental health issues and the pandemic, further exacerbating the negative effects of these issues.

Access to mental health care is critical to the overall health of both mothers and their newborns – now more than ever. Untreated maternal mental health issues can have a long-term negative impact on mother, baby, family, and society. 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 Program provides grants to states to address maternal depression, thereby helping new mothers and their babies achieve the best start possible. States that have received funding have created 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 maternal mental health program is currently funded at \$5 million annually, and is authorized by the 21st Century Cures Act. When the Request for Proposals first circulated in FY2018, thirty states applied for funding, but only seven states were awarded five-year cooperative agreements because of funding restrictions. Subsequent Fiscal Years have provided continuation funding to maintain these seven state grants, but have left the remaining states without an opportunity for assistance. We request including an additional \$40 million in funding for this program in the "Build Back Better" reconciliation package, to assist additional states to launch programs and to allow HRSA to establish a Technical Assistance Center to provide other 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. Should you have any questions, please contact Jamie Zahlaway Belsito at jbelsito@mmhla.org or 978.998.2260.

Sincerely,



Adrienne Griffen, MPP
Executive Director
Maternal Mental Health Leadership Alliance