May 30, 2019

The Honorable Roy Blunt
Chairman
Appropriations Subcommittee on Labor, Health
and Human Services, Education and Related Agencies (LHHS)
United States Senate
131 Dirksen Senate Office Building
Washington, D.C. 20510

The Honorable Patty Murray
Ranking Member
Appropriations Subcommittee on Labor, Health
and Human Services, Education and Related Agencies (LHHS)
United States Senate
131 Dirksen Senate Office Building
Washington, D.C. 20510

Dear Chairman Blunt and Ranking Member Murray:

On behalf of the undersigned national, regional, and local organizations, we respectfully request that you include report language within the Fiscal Year (FY) 2020 LHHS appropriations bill to conduct an interagency report at the US Department of Health and Human Services (HHS) on the role each agency plays in addressing gaps in maternal mental health for new and expectant mothers.

All women who are or have recently been pregnant are at risk of maternal stress and maternal mental health (MMH) disorders. MMH disorders are the most common complication of pregnancy in the United States, surpassing gestational diabetes and preeclampsia combined, and suicide is one of the leading causes of death for women in the first year after giving birth.1 Twenty percent of childbearing women will experience an MMH disorder during pregnancy or the first year following childbirth.2,3,4 When factoring in the social determinants of health, that number can grow as high as 50 percent of new or expectant mothers among those living in poverty.5,6

While these disorders have high prevalence rates among new and expectant mothers, half of mothers with a diagnosis of depression do not receive the treatment they need.7 Additionally, untreated MMH disorders cost the U.S. an estimated $14.2 billion in societal costs for all births in 2017, an average of nearly $32,000 per mother with an MMH disorder and her child over a six-year time frame.8 These societal costs are borne out through maternal productivity loss, greater use of public sector services, including welfare and Medicaid costs, and higher health care costs attributable to worse maternal and child health outcomes.9

Efforts to detect and treat MMH disorders will improve health outcomes for mothers and their children, as well as improve women’s productivity. This proactive approach will lessen the use of social services and subsequent costs to the government.

The U.S. House of Representatives recognizes the importance of identifying and treating MMH disorders in its FY 2020 LHHS appropriations report. The report directs HHS to conduct an interagency report on the

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8 Id.
9 Id.
role each agency can take to address gaps in maternal mental health for new and expectant mothers. We appreciate the work of your Committee in supporting maternal health programs and the implementation of the bipartisan Bringing Postpartum Depression Out of the Shadows Act of 2015 (S. 2311/H.R. 3235) which passed as part of the 21st Century Cures Act (P.L. 114-225). To build on Congress’ work to address these preventable, treatable, and temporary mental health disorders, we respectfully request that you include the following report language, which is identical to the language in the House FY2020 LHHS report.

“The Committee is concerned that up to 20 percent of new or expectant mothers will experience a maternal mental health disorder during pregnancy or within the first year after childbirth – such as depression, anxiety, or postpartum psychosis. Untreated maternal mental health disorders negatively impact the short and long-term health of affected mothers and their children, with symptoms leading to adverse birth outcomes, impaired maternal-infant bonding, poor infant growth, childhood emotional and behavioral problems, and significant medical and economic cost. The Committee directs the Secretary to submit a report, in consultation with HRSA, SAMHSA, CDC, CMS, Office of the Surgeon General, Office on Women’s Health, and Office of Minority Health to the Committees on Appropriations within 180 days of enactment of this Act on the role that each agency can take to address gaps in maternal mental health public awareness, screening diagnosis, and delivery for pregnant and postpartum women.”

Should you have any questions, please contact 2020 MOM representative Katrina Velasquez at Katrina.velasquez@centerroadssolutions.com.

Sincerely,

1,000 Days
2020 MOM
American Academy of Pediatrics
American Art Therapy Association
American Association for Marriage and Family Therapy
American Association for Psychoanalysis in Clinical Social Work
American Association of Colleges of Nursing
American College of Nurse-Midwives
American College of Obstetricians and Gynecologists
American Group Psychotherapy Association
American Medical Women's Association
Anxiety and Depression Association of America
Association for Ambulatory Behavioral Healthcare
Association for Prevention Teaching and Research
Association of Maternal & Child Health Programs
Association of State and Territorial Health Officials
Association of Women's Health, Obstetric and Neonatal Nurses
Boston University School of Public Health
Children's Dental Health Project
Depression and Bipolar Support Alliance
Eating Disorders Coalition
Every Mother Counts
Expecting Health, Genetic Alliance
Family Voices
Frontier Nursing University
Global Alliance for Behavioral Health and Social Justice
Illinois Association for Behavioral Health
International OCD Foundation
Legal Action Center
Lifeline4Moms, MCPAP for Moms, UMass Medical School
March of Dimes
Maternal Mental Health Leadership Alliance
Mental Health America
National Association of County Behavioral Health & Developmental Disability Directors (NACBHDD)
National Association for Rural Mental Health (NARMH)
National Association for Public Health Statistics and Information Systems (NAPHSIS)
National Alliance of State & Territorial AIDS Directors (NASTAD)
National Alliance on Mental Illness
National Association for Children's Behavioral Health
National Association of Nurse Practitioners in Women's Health
National Association of Pediatric Nurse Practitioners
National Association of Social Workers
National Birth Equity Collaborative
National Board for Certified Counselors
National Council for Behavioral Health
National Eating Disorders Association
National Federation of Families for Children’s Mental Health
National Institute for Children's Health Quality
National Register of Health Service Psychologists
National WIC Association
Organization of Teratology Information Specialists
Parents as Teachers
Postpartum Support International
Postpartum Support Virginia
Prevention Institute
RESULTS
Safe States Alliance
Schizophrenia and Related Disorders Alliance of America
Shades of Blue Project
Society for Maternal-Fetal Medicine
South Shore Health
The Kennedy Forum
The National Alliance to Advance Adolescent Health
Treatment Communities of America
University of Massachusetts Medical School/UMass Memorial Health Care
WomenHeart: The National Coalition for Women with Heart Disease