

CQMC Coalition for Quality Maternity Care

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May 31, 2012

The Honorable Steve Cohen
U.S. House of Representatives
Washington, DC 20515

Dear Representative Cohen:

On behalf of the Coalition for Quality Maternity Care (CQMC), a coalition of national professional, consumer, and human rights organizations that promote high quality maternity care for all women and newborns, we write to thank you for your efforts to address infant mortality by championing the Nationally Enhancing the Wellbeing of Babies through Outreach and Research Now (NEWBORN) Act (H.R.2127). The CQMC is proud to endorse your legislation at this time.

The U.S. infant mortality rate is one of the highest among all developed countries. The disparity in rates within the United States is alarming as well, with black babies dying at more than twice the rate of white babies. The most recent statistics from 2007 show that the U.S. rate of almost seven deaths per 1,000 live births ranked the U.S. behind the majority of other developed countries. Thirty developed countries have lower infant mortality rates, according to the Organization for Economic Cooperation and Development, all of them spending much less than we do on health care.

Within the United States, infant mortality ranges from a high of almost 10 deaths per 1,000 in Mississippi and Alabama to about five deaths per 1,000 in Washington and Massachusetts. Although the overall rates have been slowly declining since 2000, the huge gap between whites and blacks persists. American women who are most likely to lose their babies are non-Hispanic black women, with a rate almost 2 1/2 times greater than that for non-Hispanic white women.

H.R.2127 requires the Secretary to give preference to eligible entities proposing to serve any of the 15 counties or groups of counties with the highest rates of infant mortality in the United States in the past three years. It sets forth uses of grant funds, which may include: (1) developing a plan that identifies the individual needs of each community to be served and strategies to address those needs; (2) providing outreach to at-risk mothers; (3) developing and implementing standardized systems for improved access, utilization, and quality of social, educational, and clinical services to promote healthy pregnancies, full-term births, and healthy infancies delivered to women and their infants; (4) establishing a rural outreach program to provide care to at-risk mothers in rural areas; (5) establishing regional public education campaigns; and (6) coordinating efforts between health departments to be served through the infant mortality program and existing entities that work to reduce the rate of infant mortality within an area.



The time is now to address infant mortality and maternity care in a meaningful way. To this end, the CQMC is working to establish national strategies to ensure access to affordable, high quality maternity care for all women and infants. It seeks to achieve this goal by removing barriers to optimal maternal health practice, promoting models of care that are evidence-based, improving maternity care choices for women, and reducing disparities in maternal and newborn health outcomes.

CQMC applauds your leadership in this area and stands ready to help you to achieve the passage of H.R.2127. If you wish to draw upon our assistance, please contact Patrick Cooney at (202) 347-0034 or via email at patrick@federalgrp.com.

Sincerely,

American Association of Birth Centers
American College of Nurse-Midwives
Amnesty International USA
Association of Women's Health, Obstetric and Neonatal Nurses
Black Women's Health Imperative
Childbirth Connection
International Center for Traditional Childbearing
Midwives Alliance of North America
National Association of Certified Professional Midwives