

Federal Fiscal Year 2013 Budgets and Maternal Health

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 express our strong opposition to any reductions in funding to programs that have shown to be critical in improving both maternal and child health in the fiscal year (FY) 2013 appropriations process.

The Title V Maternal and Child Health (MCH) Block Grant is the only federal program focused exclusively on improving the health of all mothers and children through well-established federal/state partnerships. Yet the MCH Block Grant has consistently faced funding reductions since 2003 and was cut by approximately \$16 million in FY 2012. The CQMC urges funding of the Title V Maternal and Child Health Block Grant program at the FY12 appropriated level of \$645 million. Any cuts to this vital program would have a significant impact on the more than 39 million individuals, including 2.5 million pregnant women, 4.1 million infants, and 27.6 million children, 1.9 of whom have special health care needs. The Title V program ensures access to quality care aimed at reducing infant mortality for mothers and children; provides comprehensive prenatal and postnatal care (especially to low-income and at-risk pregnant women); and increases the number of children who receive health assessments, follow-up diagnostic and treatment, and essential preventive and rehabilitative health services.

The CQMC also strongly opposes any cuts to the Title X family planning program. Title X is a critical safety net program dedicated to providing family-planning and reproductive health services—like pregnancy testing and counseling—to vulnerable populations. Family planning is closely linked to maternal health, as women whose pregnancies are unplanned often receive no or late prenatal care and experience worse pregnancy outcomes. As a coalition committed to maternal health, we cannot overemphasize the importance of family planning and birth spacing, and believe it is essential to provide such preventive services to childbearing aged women.

CQMC stands firmly in opposition to cuts to essential public health programs promoting maternal health. In the United States, maternal mortality has become an embarrassing crisis. An Amnesty International report found that in 2010 the U.S. ranked 50th in the world in maternal mortality. Profound racial disparities in maternal and infant mortality persist: African American women are more than three times as likely to die in childbirth as white women, and the mortality rate for black infants remains more than twice that for white infants. In addition, women in low-income communities are twice as likely to suffer a maternal death as women in higher income areas. It is clear that any reductions in funding to maternal health programs will only exacerbate the maternal health crisis and will have a detrimental impact on women receiving essential prenatal and infant care, comprehensive family planning, and other preventive health services. CQMC urges Congress to protect and increase funding for these public health programs that will advance and improve health outcomes for our nation's mothers and infants, eliminate disparities in maternal health, and contribute to a reversal of the maternal mortality crisis, which has worsened over the past twenty years.

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The state of health of childbearing women is considered a key indication of a society's health and the effectiveness of its health care system. The time is now to improve the quality of maternity care in the U.S. 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. If you wish to draw upon our assistance, please do not hesitate to contact Patrick Cooney at (202) 347-0034.

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