

May 24, 2021

The Honorable Lucille Roybal-Allard
The Honorable Jamie Herrera Beutler
The Honorable Katherine Clark
The Honorable Ashley Hinson

U.S. House of Representatives
Washington, DC 20515

Dear Representatives Roybal-Allard, Herrera Beutler, Clark, and Hinson,

On behalf of the undersigned organizations which represent a cross section of maternal health care professionals, leaders in women's and public health, those providing care to underserved and rural populations, consumers, and mothers from across the nation, we write in support of the *Midwives for Maximizing Optimal Maternity Service (MOMS) Act* (H.R. 3352). Through expanding scholarship opportunities for student midwives enrolled in accredited midwifery education programs, the *Midwives for MOMS Act* will increase access to evidence-based and culturally congruent maternity care as provided by Certified Nurse-Midwives (CNMs), Certified Midwives (CMs), and Certified Professional Midwives (CPMs). We view this legislation as integral to policy discussions around strategies to reduce maternal mortality and eliminate racial disparities in maternal and infant health outcomes that are particularly acute for Black, Brown and Indigenous communities.

Numerous studies show that better integration of midwives practicing to the full extent of their accredited education, clinical training, and national certification within a team-based care model can help reduce maternal and neonatal mortality, rates of stillbirth, perineal trauma, instrumental births, intrapartum analgesia use, rates of severe blood loss, preterm birth, low birth weight, and neonatal hypothermia.ⁱ While midwifery care has been associated with more efficient use of resources and improved outcomes including increased rates of spontaneous labor, vaginal birth, and breastfeeding, midwives remain drastically underutilized in health systems within the United States.ⁱⁱ Midwives that are educated and qualified to international standards can provide 87% of services needed by mothers and newborns; however, midwives only attend roughly 10% of total US births.^{iii iv} There are several reasons for this, including the narrow workforce pipeline.

The *Midwives for MOMS Act* seeks to diversify the maternal health workforce and improve access to full-scope maternity care provided by midwives in addition to alleviating significant pressures communities and health systems are experiencing. Many women and birthing people lack access to maternity care services. Maternal mortality is higher in rural and other underserved areas of the U.S., and postpartum hemorrhage rates are higher in rural hospitals. Of U.S. counties, 35% have no maternity care services and an additional 11% have limited access.^v We must do better to increase access to the broad spectrum of high-quality perinatal providers and services.

Policy efforts around improving access to maternity care and maternal health outcomes across the care continuum should include unfettered access to midwives and federal investment in accredited midwifery education. The *Midwives for MOMS Act* would prioritize grant funding for Historically Black Colleges and Universities and other Minority-Serving Institutions interested in establishing midwifery programs, as well as prioritize funding for existing programs that seek to

racially and ethnically diversify their student bodies with the goal of providing access to culturally appropriate maternity care.

Now more than ever, it is critical to center evidence-based practice and increase access to maternal health care providers and services. The *Midwives for MOMS Act* is an important step toward increasing access to and improving health outcomes for women and birthing people across the United States. We are proud to endorse *the Midwives for MOMS Act* (H.R. 3352) and look forward to working with Congress and the broader maternal health stakeholder community on its passage.

Sincerely,

2020 Mom

Accreditation Commission for Midwifery Education

American Association of Birth Centers

American Association of Colleges of Nursing

American Association of Nurse Anesthetists

American College of Nurse-Midwives

American Midwifery Certification Board

American Nurses Association

Association of Maternal & Child Health Programs

Every Mother Counts

HealthyWomen

Lifeline for Families Center and Lifeline for Moms Program at the University of Massachusetts

Medical School

Mahmee

Marcé of North America

March for Moms

March of Dimes

Maternal Mental Health Leadership Alliance

Midwifery Education Accreditation Council

Mom Congress

National Association of Certified Professional Midwives

National Association of Nurse Practitioners in Women's Health

National Association of Pediatric Nurse Practitioners

North American Registry for Midwives

National League for Nursing

National Partnership for Women and Families

ⁱ <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0192523>

ⁱⁱ https://www.cochrane.org/CD004667/PREG_midwife-led-continuity-models-care-compared-other-models-care-women-during-pregnancy-birth-and-early

ⁱⁱⁱ https://www.who.int/maternal_child_adolescent/topics/quality-of-care/midwifery/en/

^{iv} United States Department of Health and Human Services (US DHHS), Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), Division of Vital Statistics, Natality public-use data 2016-2019, on CDC WONDER Online Database, October 2020.

^v https://www.midwife.org/acnm/files/cclibraryfiles/filename/000000008249/MIDWIVES%20FOR%20MOMS_Policy%20Brief.pdf