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I would like to thank the Advisory Committee on Immunization Practices for allowing March of Dimes to submit public comment for the public meeting on August 26, 2020 (CDC-2020-0083). March of Dimes is the leading non-profit organization fighting for the health of all moms and babies.

As our nation is fighting the current COVID-19 pandemic, we must continue to fight to end the public health crisis facing moms and their babies. We have seen the health effects COVID-19 has had on our communities across the nation. COVID-19 has disproportionately impacted many vulnerable communities such as seniors, individuals with underlying health conditions, and people of color.ⁱ They all have had an increased risk of getting COVID-19 and an increased risk in dying from the disease.

Long-standing health disparities have put people of color at an increased risk of contracting COVID-19 because of the systemic health and social inequities that many people of color have faced and continue to face.ⁱⁱ This includes insufficient access to healthcare, social, economic, and environmental factors, and structural racism. These issues did not go away with the pandemic and only have become worse. The data has shown us that Black, Hispanic and Latinos, and American Indians/Alaska Natives have higher rates of hospitalization or death from COVID-19 than among non-Hispanic white people.

As we continue to learn more about COVID-19, it is imperative we better understand the risk COVID-19 poses to pregnant women. Recent data released from the CDC found that expectant mothers with the virus had a 50% higher chance of being admitted to intensive care and a 70% higher chance of being intubated than nonpregnant women in their childbearing years.ⁱⁱⁱ The data also showed that pregnant Latina and Black women were infected at significantly higher rates than white woman.^{iv} However, the data CDC provided was limited and missing crucial information for women such as data on race and ethnicity, underlying conditions, and outcomes.

With limited data many questions about whether or not babies can contract COVID-19 from their mother remain. Early data had suggested that babies born to mothers who were infected with the virus did not test positive for COVID-19. However, recent data published in the Journal of American Medical Association (JAMA) and other journals suggest that transmission during pregnancy may be possible.^v

Evidence demonstrates that it is important for women to get vaccinated during pregnancy for whooping cough and flu to protect herself and her baby.^{vi} By receiving these vaccines while pregnant, the baby's immune system is protected during the first month of life, as babies do not start getting vaccines until two months old.^{vii} This demonstrates the importance of pregnant women having access to a safe and effective COVID-19 vaccine to not only protect oneself, but also to protect the baby.

Additionally, the COVID-19 pandemic has helped people better understand the importance of vaccines, however it is important to continue educate individuals on the importance of getting vaccinated. During COVID-19, the Vaccine Tracking System included data that demonstrated a decrease in children staying on the recommended vaccination schedule.^{viii} Furthermore, Black and Hispanic Americans are more skeptical about the safety of vaccines and the reasons for vaccine-hesitancy in these populations include systematic racism in health care.^{ix} It is important that once a vaccination is produced for COVID-19, that there are culturally competent tools available to provide education about the vaccine and stress the benefits of receiving the vaccine.



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Therefore, as the Advisory Committee on Immunization Practices continues to create an equitable plan of distributing the COVID-19 vaccines, March of Dimes recommends considering and including pregnant and lactating women as part of the vulnerable groups to receive the vaccine and ensure that the vaccine is safe for pregnant and lactating women.

ⁱ <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-increased-risk.html>

ⁱⁱ <https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/race-ethnicity.html>

ⁱⁱⁱ <https://www.cdc.gov/mmwr/volumes/69/wr/pdfs/mm6925a1-H.pdf>

^{iv} Id.

^v <https://jamanetwork.com/journals/jama/fullarticle/2767060?resultClick=1>

^{vi} <https://www.cdc.gov/vaccines/pregnancy/vacc-during-after.html>

^{vii} <https://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html>

^{viii} <https://www.cdc.gov/mmwr/volumes/69/wr/mm6919e2.htm>

^{ix} <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5309123/>