United States Conference of Catholic Bishops 3211 FOURTH STREET NE • WASHINGTON DC 20017-1194 • 202-541-3000 WEBSITE: WWW.USCCB.ORG

May 8, 2024

Dear Senator/Representative:

On behalf of the Committee on Domestic Justice and Human Development, the Committee on Pro-Life Activities, and the Committee on Laity, Marriage, Family Life and Youth of the U.S. Conference of Catholic Bishops (USCCB), we write to encourage you in your bipartisan work to address the maternal health crisis in our country. Despite research indicating that many maternal deaths are preventable, women face a high maternal mortality rate in our country, with Black and Indigenous women particularly at risk. We have <u>previously expressed</u> our alarm over the data showing the maternal mortality rate has grown over the last two decades. ¹

At the heart of Catholic teaching is a profound awe and respect for the role God has offered women in the creation of life. As Pope Francis reminds us, in pregnancy, "A mother *joins with God* to bring forth the miracle of a new life." The bishops have also long advocated that health care is a human right. Women must therefore receive maternal health care that encompasses a wholistic view of their inherent dignity and value as expressed in the unique and God-given role of motherhood.

The USCCB previously <u>wrote</u> to all members of Congress to implore you to place a high priority on policies that advance the health, safety, and flourishing of women, children, and families. While no single policy can fully address the complex maternal health care crisis, the common good demands diligent work to create policies that will improve and protect the health of mothers and their children.

As pastors, we see mothers and families struggling with the impacts of poverty and economic stressors, racism, discrimination, family breakdown, and other forms of injustice as they seek to build and grow their families. Women face many obstacles in obtaining quality maternal health care, and we are especially concerned by the continued rise in the maternal mortality and morbidity rates and the accompanying racial disparities. We urge you to consider policies that, in

¹ While we are encouraged by the recent study indicating that the maternal mortality rate may not have increased as much as previously indicated, the study reflected a high maternal mortality rate and reinforced previous evidence indicating deep racial disparities. See K.S. Joseph, et al., Maternal mortality in the United States: are the high and rising rates due to changes in obstetrical factors, maternal medical conditions, or maternal mortality surveillance?, American Journal of Obstetrics Gynecology, Vol. 230, Issue 4, https://doi.org/10.1016/j.ajog.2023.12.038. Further research and efforts are needed to gain a deeper understanding of maternal health in our country, and racial disparities must be addressed.

² Pope Francis, *Amoris Laetitia*, No. 168 (emphasis added).

line with our long-standing health care principles, provide health care formulated to meet the needs of mothers from every walk of life.

Respect life and dignity: Every life has inherent dignity, and health care policies must respect and uphold that dignity at every stage. Maternal health policies should look to the good of all women and address the racial disparities that impact women of color, particularly Black and Indigenous women. There has also been a recent rise in the maternal mortality rate for Hispanic women, and much work must be done to address the disparities in maternal health care and to create policies that reflect a deep respect for motherhood. We urge you to work in a bipartisan manner to ensure that every woman receives maternal health care in line with her own immeasurable God-given dignity and that of her child as well.

Honoring conscience rights: The conscience rights of all participants in health care should be respected. The threat of being forced to violate one's conscience exerts downward pressure on the number of people working in health care, as both a barrier to entry and an incentive to exit. Better protection of conscience rights means more health care workers and options, which means better health care.

Truly affordable: Families face many financial obstacles in starting and growing their families, and efforts to improve the affordability of childbirth and related health care for mothers and infants are commendable. The USCCB has <u>previously called</u> on Congress to require states to provide Medicaid coverage for 12 months postpartum.³ In continuing to address affordability, particular attention should be given to poor women and families, and we especially encourage efforts directed at helping those families who cannot afford insurance but also do not qualify for Medicaid. We also welcome noted interest in addressing the cost of childbirth for insured women in pending legislative proposals as well. We call for bipartisan collaboration to address the cost of childbirth, with special attention to ensuring that help goes to the mothers and families who need it most.

Comprehensive and high quality: Women should receive comprehensive and high quality health care in preparation for and throughout pregnancy, childbirth, and the post-partum period. Women must have access to appropriate treatment for substance abuse disorders, mental illness, and mental health challenges, especially post-partum depression, and efforts must be made to understand and address the high rates of maternal mortality and morbidity. Particularly commendable is the bipartisan work reflected in the Preventing Maternal Deaths Reauthorization Act (H.R. 3838/S. 2415) and the PREEMIE Reauthorization Act (H.R. 3226/S. 1573), which address the maternal mortality crisis and the high rate of preterm births here in the United States.

³ The USCCB also called for Medicaid and Children's Health Insurance continuous coverage for children as required federal benefits.

These two pieces of legislation would facilitate further understanding of maternal mortality and preterm births and promote efforts to prevent them, and we urge you to pass these bills this term.

We thank you for your consideration of these views, and we stand ready to work with you in creating policies directed at improving maternal health.

Sincerely,



Archbishop of Ukrainian Catholic Archeparchy of Philadelphia

Chairman, Committee on Domestic Justice and Human Development

Most Rev. Robert E. Barron

Bishop of Winona-Rochester

+ Robert Baum

Chairman, Committee on Laity, Marriage, Family Life and Youth

Most Rev. Michael F. Burbidge

Bishop of Arlington

Chairman, Committee on Pro-Life Activities

Michael F. Burlidge