118TH CONGRESS
2D SESSION

S. RES. 773

Supporting the ideals of Bump Day to ensure, through advocacy, awareness, and action, that every mom, regardless of where she lives, the color of her skin, or her ability to pay, gets the care she needs to deliver a safe pregnancy and birth, and a healthy future for herself and the baby she loves.

IN THE SENATE OF THE UNITED STATES

JULY 25, 2024

Mr. COONS (for himself, Ms. COLLINS, and Ms. BUTLER) submitted the following resolution; which was referred to the Committee on Health, Education, Labor, and Pensions

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RESOLUTION

Supporting the ideals of Bump Day to ensure, through advocacy, awareness, and action, that every mom, regardless of where she lives, the color of her skin, or her ability to pay, gets the care she needs to deliver a safe pregnancy and birth, and a healthy future for herself and the baby she loves.

Whereas Bump Day is an annual global campaign that celebrates beautiful bumps and healthy pregnancies while raising awareness about and calling for action to address the urgent need for better, more accessible, more respectful, and more responsive maternal healthcare, promoting healthy pregnancies, safe births, and healthy babies in

the United States and ending the crisis of maternal mortality and morbidity;

Whereas, each year since 2022, more than 800 women in the United States die from pregnancy-related and childbirth-related complications;

Whereas each year approximately 70,000 women in the United States suffer near-fatal complications or serious lifelong health consequences, including permanent disability, from pregnancy-related and childbirth-related complications;

Whereas stillbirth affects approximately 1 in 175 births, and each year approximately 21,000 babies are stillborn in the United States, with many of those deaths considered preventable;

Whereas 80 percent of all maternal deaths in the United States are preventable;

Whereas women in the United States are more likely to die from childbirth-related or pregnancy-related complications than women in all other high-income countries, and, as of the date of adoption of this resolution, the United States is the only high-income country in the world where maternal mortality is increasing;

Whereas 1 in 7 infants in the United States are born to a woman receiving inadequate prenatal care;

Whereas nearly 7 percent of infants in the United States are born to a woman who received late or no prenatal care;

Whereas pregnant women in the United States who do not receive prenatal care during pregnancy are 3 to 4 times more likely to die from pregnancy-related complications;

Whereas Black, American Indian, and Alaska Native women in the United States are 2 to 3 times more likely to die from pregnancy-related causes compared to White women;

Whereas early screening for and management of diabetes and hypertension can reduce the risk of serious pregnancy and postpartum complications for both a mom and her baby;

Whereas screening for, and treatment of, periodontal disease before and during pregnancy can reduce the risks of pregnancy and postpartum complications, such as preeclampsia and preterm birth;

Whereas nearly half of all maternal deaths in the United States occur in the immediate postpartum period, with 21 percent occurring between 1 and 6 weeks postpartum and 12 percent occurring during the remaining portion of the postpartum year;

Whereas, according to recommendations from the American College of Obstetricians and Gynecologists, most of the maternal deaths described in the preceding whereas clause could be prevented with increased access to and coverage for postpartum care as needed;

Whereas 1 in 5 women in the United States experience perinatal mood and anxiety disorders (referred to in this preamble as ''PMAD''), with suicide being a leading cause of preventable maternal deaths, and untreated PMADs costing the United States $14,200,000,000 annually;

Whereas intimate partner violence (referred to in this preamble as ''IPV'') is a leading cause of maternal death,

and women are more likely to experience IPV during pregnancy than at any other time in their lives;

Whereas untreated substance use disorders in pregnant women can lead to long-term, potentially fatal complications for the baby, including low birth weight, preterm birth, placental abruptions, and sudden unexplained infant death syndrome;

Whereas doula support has been shown—

(1) to improve pregnancy, birth, and postpartum outcomes;

(2) to lower pregnancy-related and childbirth-related costs by lowering rates of cesarean birth, epidermal anesthesia, and other interventions; and

(3) to reduce the impact of racial bias on pregnant and postpartum women of color;

Whereas research demonstrates that midwife care contributes to better maternal health outcomes, lowers risks of unnecessary cesarean births and postpartum mood disorders, and reduces racial and geographic pregnancy-related disparities;

Whereas incarcerated pregnant and postpartum women face heightened risks for maternal and infant mortality and complications, as well as maternal mood disorders, and should be provided quality, comprehensive care;

Whereas the rate of maternal mortality and morbidity in rural and other underserved areas in the United States is disproportionately high due to challenges in accessing the comprehensive, affordable, and quality maternal healthcare that all moms deserve;

Whereas more than half of all rural counties in the United States do not have access to hospital-based obstetric services;

Whereas increasing access to broadband, telehealth, mobile maternity care, home blood pressure monitoring, and information relating to urgent maternal warning signs could improve maternal outcomes;

Whereas awareness of urgent maternal warning signs, symptoms during pregnancy, postpartum, prompt diagnosis, and treatment can prevent mortality and morbidity;

Whereas the engagement and inclusion of a father in prenatal and postnatal care can improve maternal and infant outcomes;

Whereas every expectant mom deserves the respectful, responsive care and support she needs to deliver a safe pregnancy, healthy birth, and healthy future to herself and her baby; and

Whereas Wednesday, July 24, 2024, and all subsequent third Wednesdays in July would be an appropriate day for the celebration of Bump Day: Now, therefore, be it

Resolved, That the Senate—

(1) celebrates the goal of Bump Day of raising awareness about the need for improved maternal healthcare in the United States and globally, and of ending all preventable maternal deaths;

(2) recognizes the critical role of health workers and the importance of growing the maternal health workforce, including midwives, mental health providers, and doulas, and of increasing telehealth and

mobile care in achieving safe, healthy pregnancies, and deliveries in the United States;

(3) recognizes the benefits of evidence-based group prenatal and postpartum care approaches;

(4) recognizes the vital role that fathers and other supportive partners play in promoting the health and well-being of expectant mothers and newborns, including by—

(A) supporting healthy pregnancies and safe births;

(B) contributing to improved health outcomes for mothers and babies; and

(C) encouraging and supporting breastfeeding initiation and success; and

(5) reaffirms continued leadership by the United States to combat preventable maternal deaths in the United States and globally.

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