January 27, 2020

The Honorable Alma Adams
Chairwoman
Education and Labor
Workforce Protections Subcommittee
2176 Rayburn House Office Building
Washington, DC 20515

The Honorable Bradley Byrne
Ranking Member
Education and Labor
Workforce Protections Subcommittee
2101 Rayburn House Office Building
Washington, DC 20515

Dear Chairwoman Adams and Representative Byrne:

I write to thank you for holding the hearing: "Expecting More: Addressing America’s Maternal and Infant Health Crisis." The National Association of County and City Health Officials (NACCHO) represents the nation’s nearly 3,000 local health departments across the country, who are responsible for safeguarding the health of all Americans. These city, county, metropolitan, district, and tribal departments are on the front lines of protecting maternal and child health in communities across the nation.

Local health departments are key partners with Congress and state and local governments to protect maternal and infant health. According to NACCHO’s most recent National Profile of Local Health Departments, about one-third of local health departments directly provide prenatal and well-baby care. In addition, 88% of local health departments provide childhood immunizations to protect children from preventable infectious diseases including measles, influenza, and pertussis (whooping cough.) Two-thirds of local health departments also operate the local Women, Infant, and Child (WIC) program, and 60% engage in home visiting programs. In many areas local health departments are a consistent, and sometimes the only, sources of support for low-income and minority women at the highest risk for maternal mortality and morbidity.¹

Local health departments have also been leaders in addressing maternal and infant mortality in their communities. For example, the Baltimore City Health Department in Maryland has augmented the state of Maryland’s Maternal Mortality Review Process with a Baltimore-focused severe maternal morbidity review process. For every maternal death, there are significantly more near misses that greatly impact the lives and health of mothers and their babies. The city health department’s relationships with local hospitals allow for facility-based reviews, citywide aggregation of data, and selected maternal interviews designed to transform how obstetric care is provided. The Champaign-Urbana Public Health District in Illinois aims to improve maternal health through early identification of risk factors during pregnancy and the postpartum period. They currently conduct research examining racial differences in perinatal depression and explore how depressive symptoms and other risk factors contribute to adverse birth outcomes. Alameda County in California held “Club Mom” baby showers in neighborhoods with the

¹ Additional information can be found in NACCHO’s National Profile of Local Health Departments, 2016, available here: http://nacchoprofilestudy.org/wp-content/uploads/2017/01/Figure7-5.jpg.
highest levels of adverse birth outcomes and raffled off baby supplies while connecting women to the county’s prenatal services.

Moreover, local health departments have been on the front lines in reducing infant mortality. Many lead or participate in fetal and infant mortality reviews, interdisciplinary panels that investigate fetal and infant deaths to identify gaps in systems and services and encourage preventive measures. As deaths from congenital syphilis continue to rise, for example, local health departments collaborate with public and private providers to support screening and treatment for pregnant people and infants.

NACCHO looks forward to continuing to work with Congress to address the challenges to the health and well-being of women and children. Please contact Eli Briggs, NACCHO Senior Director of Government Affairs at ebriggs@naccho.org with any questions.

Sincerely,

Lori Tremmel Freeman, MBA
Chief Executive Officer