

January 14, 2026

The Honorable Susan Collins  
Chair  
Senate Appropriations Committee  
U.S. Senate  
Washington, DC 20510

The Honorable Patty Murray  
Ranking Member  
Senate Appropriations Committee  
U.S. Senate  
Washington, DC 20510

The Honorable Shelley Moore Capito  
Chair  
Senate Labor, Health and Human Services,  
Education, and Related Agencies  
Appropriations Subcommittee  
Washington, DC 20510

The Honorable Tammy Baldwin  
Ranking Member  
Senate Labor, Health and Human Services,  
Education, and Related Agencies  
Appropriations Subcommittee  
Washington, DC 20510

Dear Chair Collins, Vice Chair Murray, Chair Capito, and Ranking Member Baldwin:

On behalf of the 120 organizations and institutions committed to improving maternal and child health, we would like to express our sincere appreciation for your steadfast commitment to supporting programs aimed at reducing the incidence of stillbirth, so that fewer families endure this heartbreaking tragedy. Thanks to your committees' leadership, stillbirth is finally beginning to receive the recognition and attention that it has long deserved, and we cannot afford to lose this hard-won momentum.

We are especially grateful for the Senate's continued support of our \$1.75 million level funding request and the House's increase of \$250,000 in funding to support ongoing implementation of the Stillbirth Working Group's recommendations at the Department of Health and Human Services (HHS). **As you consider the FY 2026 Labor, Health and Human Services, Education, and Related Agencies (LHHS) appropriations bill, we respectfully request that the final funding bill retain the House committee approved funding level of \$2 million to ensure this crucial progress continues.**

A pregnancy ending in stillbirth is a tragedy. In the United States, there are more than 20,000 stillbirths every year—that's 60 per day—often in healthy, seemingly low-risk pregnancies. Stillbirth affects 1 in 175 pregnancies and does not discriminate: impacting women of all races, ethnicities, income levels, and all ages. Mothers who experience a stillbirth are also more likely to die after delivery, and severe morbidity is nearly five times more common than in those whose babies are born alive. Studies indicate that at least 25 percent of U.S. stillbirths are preventable, meaning more than 5,000 stillbirths could be prevented every year. And yet despite staggering statistics and decades of medical advances, the U.S. stillbirth rate has not significantly improved over the last 20 years.<sup>[1]</sup>

To address this public health issue, Congress provided initial funding of \$750,000 in the FY2022 appropriations law, directing the HHS Secretary to convene a Stillbirth Working Group, comprising of a multidisciplinary team of experts across the public and private sectors to examine barriers to data collection, known risk factors and high-risk communities, and assess the psychological impact and treatment for mothers. Recognizing the need for expanded efforts, the FY2023 appropriations law increased funding for the Stillbirth Working Group to \$1.75 million. The Stillbirth Working Group released its final report, *Working to Address the Tragedy of Stillbirth*, on March 15, 2023, with important recommendations that included, "creating and supporting a full research agenda, including research on both known and unknown risk factors and physiologic mechanisms, and to drive the development of interventions to ultimately prevent stillbirth."<sup>[2]</sup> A follow up report, published in July 2024 provided implementation recommendations, emphasizing the need for ensuring high-quality data. Meaningful research and quality data is needed to drive effective prevention strategies which will lead to better outcomes.<sup>[3]</sup> Building on this progress, Congress sustained funding of \$1.75 million in both FY 2024 and FY 2025 to prioritize the Department-wide implementation of these recommendations and promote evidence-based stillbirth awareness and prevention activities across HHS, though more work remains to fully implement these recommendations.

**As such, we respectfully urge the Committee, as it moves forward with negotiations on the final FY 2026 LHHS appropriations bill to increase funding for the Stillbirth Working Group to \$2 million, aligning with the House committee-approved LHHS bill.** This funding will support ongoing efforts to issue guidelines to state health departments and vital statistics units, which will improve stillbirth data collection, reporting, and timeliness. Every mother—urban, suburban, or rural—should have a healthy birth outcome, but unfortunately far too many don't. With accurate and timely data, we can better understand the causes of stillbirth and develop effective prevention strategies. Our country continues to face a maternal and infant health crisis; despite being one of the wealthiest nations in the world, outcomes remain unacceptably poor. This additional funding will be instrumental in helping ensure U.S. families thrive, more babies survive and sustain momentum in addressing this preventable tragedy.

We greatly appreciate the ongoing support this program has received, and hope that it continues as we work together to bring about meaningful and lasting change! Thank you for your time and consideration of this request. Please feel free to direct questions to Debbie Haine Vijayvergiya at [debbie@dlh-associates.com](mailto:debbie@dlh-associates.com).

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[1] *What is Stillbirth?* | CDC. (2022, September 29). Centers for Disease Control and Prevention. <https://www.cdc.gov/ncbddd/stillbirth/facts.html>

[2] "Stillbirth Working Group of Council." Eunice Kennedy Shriver National Institute of Child Health and Human Development, U.S. Department of Health, and Human Services, <https://www.nichd.nih.gov/about/advisory/council/stillbirth-working-group-of-council>.

[3] Page, J. M., Thorsten, V., Reddy, U. M., Dudley, D. J., Hogue, C. J. R., Saade, G. R., Pinar, H., Parker, C. B., Conway, D., Stoll, B. J., Coustan, D., Bukowski, R., Varner, M. W., Goldenberg, R. L., Gibbins, K., & Silver, R. M. (2018). Potentially Preventable Stillbirth in a Diverse U.S. Cohort. *Obstetrics and gynecology*, 131(2), 336–343. <https://doi.org/10.1097/AOG.0000000000002421>

Sincerely,

1st Breath

A Better Balance

Aaliyah in Action

ACOG Vermont

American Academy of Pediatrics (AAP)

American College of Nurse-Midwives (ACNM)

American College of Obstetricians & Gynecologists (ACOG)

American Medical Association (AMA)

Amniotic Fluid Embolism Foundation (AFE)

Ashlie's Embrace

Association of Maternal & Child Health Programs (AMCHP)

Association of Schools & Programs of Public Health (ASPPH)

Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN)

ATIME/HUG

Babies Remembered

Baby Loss Family Advisors

Bay State Birth Coalition

California Chapter of Postpartum Support International

Centering Healthcare Institute

Central Jersey Family Health Consortium

Cribs for Kids, Inc.

East Cascade Women's Group

Embrace Foundation

Every Mother Counts

Families Forward Resource Center

Families of Color Seattle

Family Health Initiatives

First Candle

Global Alliance to Prevent Prematurity and Stillbirth (GAPPS)

Griffin Cares Foundation

Group B Strep International  
Healing with Wisdom  
Healthy Birth Day Inc  
Healthy Mothers, Healthy Babies- The Montana Coalition  
HealthyWomen  
Heart & Sol Collective  
Hope After Loss Clinic at the University of Wisconsin  
Hope for HIE  
Hyperemesis Education and Research Foundation  
I Was Supposed To Have A Baby  
In the Arms of Jesus Comfort + Advocacy  
International Partnership for Perinatal Excellence  
Jaces Journey  
JustActions  
Kansas Action for Children  
Kansas Birth Justice Society  
Kansas Breastfeeding Coalition  
Kansas Infant Death and SIDS (KIDS) Network  
Kentucky Primary Care Association  
Las Cruces Doula  
League of Women Voters Metropolitan Des Moines  
Lifeline for Families and Lifeline for Moms Program at UMass Chan Medical School  
M.A.M.A. Mom's Advocate & Maternal Advisor, LLC.  
M.E.N.D. (Mommies Enduring Neonatal Death)  
Madison's Closet  
March of Dimes (MOD)  
Mass. PPD Fund  
Maternal Mental Health Leadership Alliance  
Matties Memory Inc  
Measure the Placenta  
Mera's Mission  
Midwives Alliance of Hawaii  
Missing Pieces Support Group  
Mom Congress  
MomsRising  
National Association of Nurse Practitioners in Women's Health  
National Association of Pediatric Nurse Practitioners  
National CMV Foundation  
National Education Association (NEA)  
National League for Nursing  
NechamaComfort  
Nemours Children's Health  
New Brunswick Area NAACP  
New Mexico DOH  
New Mexico Doula Association  
New York State Perinatal Association  
Open Arms Perinatal Services  
Partnership for Maternal and Child Health of Northern New Jersey  
Patients For Patient Safety US  
Postpartum Support International  
Postpartum Support International Delaware  
Postpartum Support International-Arizona Chapter  
Postpartum Support International-Utah  
Postpartum Support Virginia

Preeclampsia Foundation  
Preemieworld Foundation  
Propa City Community Outreach  
Reproductive and Placental Research Unit, Yale University  
Return to Zero: Hope  
Saul's Light  
Selah Care Farm  
Shades of Blue Project  
Share Parents of Utah  
Society for Maternal-Fetal Medicine (SMFM)  
Society for Reproductive Investigation (SRI)  
Southern New Jersey Perinatal Cooperative  
Speaking of Birth  
St. George Share  
Star Legacy Foundation  
Star Legacy Foundation - Western New York Chapter  
Start Healing Together  
Stillbirth Advocacy Working Group (International Stillbirth Alliance)  
Tender Lily Care  
The 2 Degrees Foundation  
The Iris Fund  
The Marigold Foundation  
The Natalie Foundation  
The Orsini Way  
The PPROM Foundation  
The Shane Foundation  
The Tara Hansen Foundation  
Three Little Birds Perinatal  
University of Utah  
University of Utah Stillbirth Center of Excellence  
Utah Pacific Islander Health Coalition  
Vermont Medical Society  
Voices for Utah Children  
What to Expect Project  
Women and Children Counseling, Consulting, & Educating LLC  
Yale University Reproductive and Placental Research Unit

CC:

Senate Majority Leader John Thune  
Senate Minority Leader Chuck Schumer  
House Speaker Mike Johnson  
House Minority Leader Hakeem Jeffries

Senate Committee on Appropriations  
House Committee on Appropriations

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The Honorable Steve Daines  
The Honorable Raphael Warnock  
The Honorable Elizabeth Warren  
The Honorable Kirsten Gillibrand  
The Honorable Ben Ray Lujan

The Honorable Young Kim

The Honorable Kathy Castor  
The Honorable Robin Kelly  
The Honorable Mikie Sherril  
The Honorable Eric Sorensen  
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The Honorable Nydia Velazquez  
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