BLUEPRINT FOR LIFE

2026 EDITION

PRO-MOM • PRO-BABY • PRO-LIFE • PRO-FAMILY

Maternal Health Policy Toolkit

A Conservative Messaging & Policy Toolkit for advocates, communicators, and policymakers.



> *It is the task of our government to make it easier for young moms and dads to afford to have kids, to bring them into the world, and to welcome them as the blessings that we know they are.*

JD Vance

VICE PRESIDENT OF THE UNITED STATES

Blueprint for Life Coalition

Organizations and leaders united in support of mothers, babies, and families.

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Rick Santorum, Former U.S. Senator, Pennsylvania; Chairman, Patriot Voices	**Heartbeat International**
Douglass Leadership Institute	**Democrats for Life**
Americans United for Life	**ProLove Ministries**
American Principles Project	**And Then There Were None**
National Hispanic Pastors Alliance	**Patrick Brown**, Ethics and Public Policy Center
Live Action	**Students for Life Action**
American Association of Pro-Life OBGYNs	**Catherine Glenn Foster**, First Rights Global
Pro-Life Action League	**Kathryn Jean Lopez**, National Review Institute
Project Pathfinder	**Care Net**
Mike Huckabee, Former Governor of Arkansas	**The National Association of Evangelicals (NAE)**
Christian Employers Alliance	**The Vitae Foundation**
Family Policy Alliance	**Samuel Rodriguez**, National Hispanic Christian Leadership Conference
Pro-Life Partners Foundation	**Moms for America**
Human Coalition Action	

CONTENTS

Table of Contents

01 **Executive Summary**
Topline messaging for advocates, communicators, and policymakers

02 **Administration Action**
Federal leadership on working families and maternal health

03 **Voices of Support**
Conservative leaders championing maternal health

04 **Policy Priorities**
Five pillars of a federal maternal health agenda

05 **Federal Legislation**
Active conservative supported maternal-health bills in the 119th Congress

06 **Public Opinion**
Polling data on maternal health and paid leave

07 **Conclusion**

A **Appendices**
Coalition assets, social copy & source repository



01. Executive Summary

Topline messaging for advocates, communicators, and policymakers

Healthy Moms, Strong Families, A Strong Nation

Being Pro-Life Means Being Pro-Mom

- As conservatives that champion life, we must also champion the women who carry that young life. Healthy moms help ensure healthy babies and strong families. **Strong families mean a strong nation.**
    - As **Vice President Vance** told the 2025 March for Life: *"We failed a generation not only by permitting a culture of abortion on demand, but also by neglecting to help young parents achieve the ingredients they need to lead a happy and meaningful life."*[1]
- The pro-life movement does not end at birth. Conservatives believe every mother and her baby need support before, during, and after pregnancy. **Supporting maternal health is the natural corollary of our commitment to protecting life and strengthening families.**
    - *"Being pro-life means supporting mothers and strong families. By extending post-partum Medicaid coverage for thousands of new moms, we will set new families on a path to prosperity and opportunity."*[2] — **Governor Kim Reynolds (R-IA)**

A Strong Pro-Mom Agenda Empowers Families

- Healthcare policies **should always prioritize strong American families**. When mothers are healthy, families thrive and communities flourish. This is about removing barriers, so moms and families can succeed on their own terms.
- Expanding access to prenatal, postpartum, and mental health care gives working families the support they need **during one of the most critical and vulnerable periods of family life**.
    - *"Making sure women have the support — prenatal, postpartum, early childhood development — and supporting families along the way is critically important to making sure that every child is able to live their American Dream."*[3] — **Senator Katie Britt (R-AL)**

- This is also a workforce and economic issue. Healthier mothers are better positioned to return to work, contribute to their communities, and raise children who thrive. **Ensuring mothers have access to care is a pro-growth, pro-work policy.**

65%	80%	1 in 4
OF MATERNAL DEATHS OCCUR POSTPARTUM	OF PREGNANCY-RELATED DEATHS ARE PREVENTABLE	MOMS RETURN TO WORK 2 WEEKS AFTER BIRTH

35%	1 in 8	$50B
OF U.S. COUNTIES ARE MATERNITY CARE DESERTS	MOMS EXPERIENCE POSTPARTUM DEPRESSION	RURAL HEALTH TRANSFORMATION PROGRAM

Paid Leave Is Pro-Mom, Pro-Baby, and Pro-Family

- According to one study, 1 in 4 American mothers returns to work just two weeks after giving birth.[4] No mother should have to choose between recovering from childbirth and putting food on the table. **The postpartum period is when maternal risk is highest**: roughly 65% of maternal deaths occur after childbirth, not during it.[5]
- **Paid leave is a health benefit**. Time to recover, breastfeed, attend follow-up appointments, and bond with a newborn produces measurably better physical and mental health outcomes for both moms and babies.
    - Voters agree, for example, **74% of Republicans and 84% of Republicans with children at home support providing all workers with paid family leave** (Echelon Insights), and 59% of Republicans say they are more likely to vote for a candidate who supports broader national paid family leave (the Polling Company / Kellyanne Conway).
- Conservative states have extended paid leave for state employees and some have included paid maternity leave for public school teachers as well, models other states are following.
    - *"When you have paid family leave, you are happier. I'm actually a proponent of that. At Turning Point USA we pay for 6 months when somebody has a child. I think there's a lot of agreement we can have on that. We need to encourage having more children."*[6]

      — **Charlie Kirk**

- This is about giving employers and states the tools and incentives to support working families, and **giving states the flexibility to design programs that fit their workforce**.
    - The state-led approach is popular with voters: 67% of all voters, 70% of GOP voters 18–44, and 79% of parents support federal grants for states to establish their own paid leave plans (Winston Group).



Empowering Employers to Support New Moms

- The paid family and medical leave tax credit (Section 45S), **made permanent in the 2025 reconciliation bill signed by President Trump**, gives employers a 12.5%–25% tax credit on wages paid during qualifying leave, makes this credit permanent and extend it to PFML insurance premiums, expanding access for small and mid-sized employers who couldn't otherwise afford to offer leave.[7]
- The bipartisan *More Paid Leave for More Americans Act*, co-sponsored Rep. Stephanie Bice, (R-OK) would give states grants to **build paid parental leave programs through public-private partnerships**, federalism, not federal mandates.
- Rep. Ryan Mackenzie's (R-PA) H.R. 1424 would double the Section 45S credit by raising the base from 12.5% to 25% and the maximum to 50% of wages paid during qualifying leave to encourage more small and mid-sized businesses to voluntarily offer this leave.

Firm Foundations for Families at a Critical Time

- **A new baby is a moment of joy *and* significant financial strain**. Family-centered tax policy can ease that burden without expanding the welfare state.
- The *Supporting Newborn Parents Act* for example recognizes the changes and new demands many working families face in the first few weeks after birth and provides targeted support based on a family's earned income.

    - **Voters are on board**: 67% of all voters support a $2,000 newborn credit for working parents, including 69% of Republicans and 71% of "Very Conservative" voters (Cygnal, April 2026).
    - Asked about a "baby bonus" for new mothers, **President Trump's response: *"Sounds like a good idea to me."***[8]
- A strengthened Child Tax Credit, particularly in the early years, both supports working families and targets help to the years it's often most needed.
    - The *Family First Act* would expand the Child Tax Credit to $4,200 for children under 6 and $3,000 for all other children, and create a new $2,800 tax credit for pregnant mothers, a package supported by **72% of parents and 63% of MAGA GOP voters** (Winston Group).
    - Vice-President Vance has also called for a far stronger CTC, saying, *"I'd like to see a much higher Child Tax Credit, something like $5,000."*[9]
- The *HEALING Mothers and Fathers Act* recognizes that **families experiencing miscarriage or stillbirth deserve both time to grieve and tangible support**, including a $2,000 refundable tax credit and protected leave.
- Conservative ideas like Sen. Mike Lee's *Fairness for Stay-at-Home Parents Act* **protect new parents from being financially penalized** for choosing to stay home with a newborn.



Maternal Health Is a Rural, Urban, and Suburban Issue

- More than 35% of U.S. counties are maternity care deserts with no hospital offering obstetric care. **This crisis hits rural America especially hard**.[10]
- President Trump's $50 billion Rural Health Transformation Program is the **single largest investment in rural health care in decades** and includes maternal health.
- Studies have shown that **over 80% of pregnancy-related deaths are preventable**, and certain groups such as **Black women have up to three times higher maternal mortality**.[11] That's why

the Administration is strengthening perinatal quality collaboratives (PQCs) to improve the quality of care for these mothers and their babies.

- For Black mothers the danger is greatest after delivery: cardiac conditions are the leading cause of pregnancy-related death, **most such deaths occur in the weeks and months following birth, and the majority are preventable**, meaning care and coverage cannot stop at delivery.[12]
- Rural women experience maternal mortality rates nearly 2x as high as those in urban areas, driven in part by the growth of maternity care deserts.[13] For example the *Rural Obstetrics Readiness Act* would provide federal HHS grants for emergency obstetric care in rural and underserved communities.

Maternal Mental Health Cannot Be Ignored

- **One in eight mothers experiences postpartum depressive symptoms**. For mothers on Medicaid, rates are even higher.[14]
- Maternal mental health conditions, including postpartum depression and substance use disorders, are leading contributors to maternal mortality in the postpartum period.
- **Investing in maternal mental health is pro-family, pro-life, and pro-community**.
    - The *MOMS Act* (Sen. Katie Britt, R-AL; Rep. Michelle Fischbach, R-MN) would fund prenatal telehealth, recovery and mental health services, a national resource center, and pro-life alternatives. Legislation Susan B. Anthony Pro-Life America calls *"key to strengthening the pro-life safety net."*[15]
- **More than half of maternal deaths occur between one week and one year postpartum**[16]**;** continuity of care from conception to at least a year after birth is key for both moms and babies.
    - Conservative support includes strengthening HRSA's National Maternal Mental Health Hotline and expanding mental health screening and referral at every prenatal and postpartum visit.



02. Administration Action

Federal leadership for working families & maternal health

The Conservative Case for Maternal Health

This Is a Pro-Life Issue

The pro-life movement has always affirmed the dignity of every human life, from conception to natural death. That commitment necessarily includes the health of the mother. Supporting actions that reduce maternal mortality and expand care for pregnant and postpartum women is a key way to demonstrate that pro-life means whole-life.

This Is a Pro-Family Issue

Strong nations are built on strong families, and strong families require healthy mothers. When a mother dies or faces serious health complications, the effects ripple through families and communities for generations. Investments in maternal health strengthen the family unit, the foundational building block of American society.

This Is a Workforce and Economic Issue

Healthier mothers are better positioned to return to work, contribute to their communities, and raise children who thrive. Ensuring mothers have access to care is a pro-growth, pro-work policy.

Trump Administration Priorities & Actions

A Pro-Life Vision from the Trump Administration

Early HHS actions reflect this commitment, including ending federal funding for research using fetal tissue from elective abortions, halting the creation of new embryonic stem cell lines, and reinstating the Mexico City Policy to bar U.S. foreign aid from supporting abortion abroad.

Yet the work of building a culture of life is far from complete. A robust maternal health agenda is a necessary, proactive corollary to these efforts: we must expand access to comprehensive care for mothers and babies.

Launch of MOMS.gov on Mother's Day Weekend 2026

On Mother's Day weekend 2026 the Trump Administration launched MOMS.gov as part of a package of family-policy initiatives.[17] President Trump issued a Presidential Message on Mother's Day and held a May 11 Oval Office "Maternal Healthcare Event." MOMS.gov is an HHS-hosted resource portal for new and expecting mothers that links out to pregnancy resource centers (via Heartbeat International's Option Line), Federal Qualified Health Centers (FQHC), adoption nonprofits, and existing federal health pages.

Surrounding this rollout, the Administration also promoted several existing or previously enacted items as part of the Mother's Day message: Trump Accounts ($1,000 Treasury seed deposits for U.S. citizen children, funded through the One Big Beautiful Bill), the permanently expanded Child Tax Credit, and HHS's Perinatal Improvement Collaborative, which Deputy Assistant Secretary Dr. Dorothy Fink credited with a 41.5% reduction in maternal mortality across more than 200 participating hospitals.[18]

41.5%	Reduction in maternal mortality across more than 200 hospitals participating in HHS's Perinatal Improvement Collaborative.

$50 Billion Rural Health Transformation Program

Signed into law on July 4, 2025, as part of the One Big Beautiful Bill Act, this is the largest investment in rural health care in decades. All 50 states are receiving funding, with maternal health services explicitly included in program goals. States like Pennsylvania are using their awards to establish rural maternal health hubs providing comprehensive care from preconception through 12 months postpartum.

Administration Pro-Life Priority Framework

In September 2025, CDC released a priorities document stating that the agency will *"promote the dignity of human life at all stages of development, improve maternal health care, and strengthen the family."*[19] This reframes federal public health around a culture-of-life vision.

Administration Actions to Reduce Black Maternal Mortality

In 2024, the maternal mortality rate for Black women was 44.8 deaths per 100,000 live births, more than three times higher than the rates for White (14.2), Hispanic (12.1), and Asian (18.1) women.[20] This Administration continues to work on strengthening perinatal quality collaboratives (PQCs) to improve the quality of care for mothers and their babies. This work supports the capabilities of PQCs to improve the quality of perinatal care in their states.

44.8	Maternal deaths per 100,000 live births among Black women in 2024 — roughly 3x the rate for White women.

These deaths are not inevitable. CDC's Maternal Mortality Review Committees find that roughly 84% of pregnancy-related deaths are preventable and that preventability does not differ by race.[21] The disproportionate losses among Black mothers are, overwhelmingly, losses that could be averted with timely, quality care. A pro-life, pro-mom agenda treats closing this gap as a priority: every one of these women has inherent dignity and a family that depends on her.

The risk is concentrated in the postpartum year. A majority of pregnancy-related deaths occur after delivery, and for Black women cardiac conditions and cardiomyopathy, often detectable and treatable with timely follow-up, are the leading cause, with most cardiovascular deaths occurring weeks or months after birth.[22] Black mothers also experience severe, life-threatening "near-miss" complications at about twice the rate of White mothers,[23] and they report higher rates of postpartum depression while being diagnosed and treated less often.[24] Therefore, sustained care through the first full year after birth is crucial and helps save lives.

This is a cause conservatives continue to support. President Trump signed the Preventing Maternal Deaths Act, which funds the very review committees that produce this data, and Black pro-life leaders, including Benjamin Watson and the Douglass Leadership Institute have made protecting Black mothers central to a culture-of-life vision.

Make America Healthy Again (MAHA)

Established by executive order with $500 million in proposed funding, the MAHA Commission under HHS Secretary Kennedy is setting health priorities that include nutrition, chronic disease prevention, and maternal wellness, all of which benefit expectant and new mothers.

This 2025 MAHA Strategy, elevated breastfeeding rates and a safe donor human milk supply as explicit federal priorities (to be pursued through WIC and other channels) as well as launching Operation Stork Speed in March 2025, which triggered the first comprehensive FDA review of infant formula nutrient standards since 1998. The initiative expanded heavy-metal and PFAS contaminant testing and embedded $15 million in the FY2026 HHS budget specifically for formula oversight modernization.



03. Voices of Support

The following statements reflect a growing chorus of conservative leaders championing moms and babies as central to a pro-life, pro-family agenda.

Conservative Lawmakers

> *"Sounds like a good idea to me.*
>
> **PRESIDENT DONALD J. TRUMP**[25]
> *When asked about a $5,000 Baby Bonus*

> *"I'd like to see a much higher Child Tax Credit, something like $5,000.*
>
> **VICE PRESIDENT JD VANCE**[26]

> *"Supporting moms is important because, as beautiful a blessing as it is, there are times that can be challenging. Making sure women have the support — prenatal, postpartum, early childhood development — and supporting families along the way is critically important to making sure that every child is able to live their American Dream. We've got to do everything that we can to create a culture of life.*
>
> **SENATOR KATIE BRITT (R-AL)**[27]

> *"The maternal health crisis demands urgent action, and the Preventing Maternal Deaths Reauthorization Act is a necessary step toward protecting mothers and babies across the country. This bipartisan legislation renews our commitment to addressing maternal mortality by supporting Maternal Mortality Review Committees, fostering better data collection, and equipping healthcare providers with evidence-based best practices.*
>
> **REP. KAT CAMMACK (R-FL)**[28]

> *"The MOMS Act supports women before, during, and after they give birth. It improves access to resources and makes sure women have everything they need right at their fingertips to help them confidently carry to term and raise their child.*
>
> **REP. MICHELLE FISCHBACH (R-MN)**[29]

> *"As a doctor, caring for a pregnant mother means caring for two patients. I've worked hard with my Republican colleagues to stop taxpayer-funded abortions, protect women from dangerous abortion drugs, and uphold the pro-life values that Louisianans share.*
>
> **SENATOR BILL CASSIDY (R-LA)**[30]

> *"I've strongly supported the Maternal, Infant and Early Childhood Home Visiting Program, and last Congress, we passed legislation to help stillbirth prevention efforts. Now, I'll keep working with my colleagues to help more expectant families.*
>
> **SENATOR CHUCK GRASSLEY (R-IA)**[31]

> *"I was proud to sign a crucial bipartisan law that extends postpartum coverage for Texas mothers from two to 12 months. This postpartum extension will help Texas mothers receive high-quality healthcare across our great state.*
>
> **GOVERNOR GREG ABBOTT (R-TX)**[32]

> *"As a former OB-GYN who spent over 25 years caring for thousands of women and delivering over 5,000 babies, I understand firsthand the importance of supporting mothers throughout their pregnancy and into motherhood.*
>
> **SENATOR ROGER MARSHALL (R-KS)**[33]

> *"Congress needs to do everything we can to help parents give their kids a shot at the American Dream. My bill cuts taxes, ends marriage penalties, and streamlines benefits to support strong, working families.*
>
> **SENATOR JIM BANKS (R-IN)**[34]

> *"Being pro-life means supporting mothers and strong families. By extending post partum Medicaid coverage for thousands of new moms, we will set new families on a path to prosperity and opportunity.*
>
> **GOVERNOR KIM REYNOLDS (R-IA)**[35]

> *"I believe continuing to offer care for new moms for up to 12 months after the birth of their baby is the right thing to do. This is one more thing that we can do to tip the scales in favor of life.*
>
> **GOVERNOR TATE REEVES (R-MS)**[36]

Conservative Media and Influencers

> *When you have paid family leave, you are happier. I'm actually a proponent of that. At Turning Point USA we pay for 6 months when somebody has a child. I think there's a lot of agreement we can have on that. We need to encourage having more children.*

CHARLIE KIRK[37]

> *Two weeks ago, the Texas House passed a bipartisan bill to allow low-income moms to remain on Medicaid for up to a year after their baby's birth. There's no reason every state can't pass similar legislation, especially in light of the new reality of less legalized abortion. … This Mother's Day is a good time for a bipartisan effort to provide new mothers with better financial and medical support—it's the pro-life thing to do.*

ERICKA ANDERSEN[38]

Freelance columnist, WORLD Opinions (bylines in WSJ, NYT, USA Today). Daily Beast essay, May 13, 2023.

> *Moms.gov is a good and new initiative by the Trump administration, and it's a website that supports mothers and families. … God is working through these pregnancy care centers to give women truth, to give them resources, to connect them to believers, and to lead them to the gospel.*

ALLIE BETH STUCKEY[39]

BlazeTV host of Relatable; author of Toxic Empathy. Relatable segment on Moms.gov, May 18, 2026.

> *The time is now for lawmakers to show that government can deliver a fiscally sound paid leave plan with no mandates on business, no new taxes and no new entitlements.*

PATRICE ONWUKA[40]

Policy analyst, Independent Women's Forum; WMAL co-host. Washington Times op-ed, March 12, 2019.

Pro-Life & Conservative Organization Leaders

> *As a mother of four, I know the expenses that come with having a child don't just start when they're born. Allowing expectant parents to use the Child Tax Credit prior to birth respects this fact and aids in creating financially stable atmospheres.*

KRISTAN HAWKINS[41]

President, Students for Life of America. OSV News, July 2023 (on the Care for Her Act).

> *Consider that necessities such as diapers can cost $900 per year, with formula ringing up at $1,800 per year. Those two items alone swallow up the current $2,000 tax credit, and then some.*

TINA WHITTINGTON[42]

Executive Vice President, Students for Life of America. Townhall op-ed, May 24, 2025.

> *We're grateful to Rep. Fischbach for reintroducing the More Opportunities for Moms to Succeed Act. By supporting women through every stage of motherhood and expanding access to vital resources, this legislation is key to strengthening the pro-life safety net and building a culture that empowers women and supports their families.*

SUSAN B. ANTHONY PRO-LIFE AMERICA[43]

> *Pro-life advocates must continue serving mothers and families in need by strengthening the pro-life safety net, which presently includes 2,700 pro-life pregnancy centers nationwide. … The fight for life does not end at birth, and in a post-Roe America, these children and mothers will need our support as urgently as ever.*

MARJORIE DANNENFELSER[44]

President, Susan B. Anthony Pro-Life America. Newsweek op-ed, Jan 2022 (distinct from the quote already in your document).

> *"Whether it's by funding pregnancy centers or creating care solutions or offering more financial support to moms, we call on all leaders in the states, Republican and Democrat, to build upon the pro-life safety net legislation this year.*

KELSEY PRITCHARD[45]

Director of State Public Affairs, SBA Pro-Life America. Catholic News Agency, 2024.

> *"The 'Supporting Pregnant and Parenting Families Act' is a bill that every American should support.*

PENNY NANCE[46]

CEO and President, Concerned Women for America. January 2024.

> *"Maternal mortality rates among Black women are nearly three times those of white women. They are less likely to have quality prenatal care and health insurance. One-third of Black mothers live under the poverty line.*

BEN WATSON[47]

Benjamin Watson is a former NFL player and Super Bowl champion.

Faith-Based & Religious Conservative Leaders

> *"The USCCB has previously called on Congress to require states to provide Medicaid coverage for 12 months postpartum. … 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.*

UNITED STATES CONFERENCE OF CATHOLIC BISHOPS, COMMITTEE CHAIRMEN[48]

Abp. Borys Gudziak, Bp. Robert E. Barron, and Bp. Michael F. Burbidge.

> *“Making postpartum coverage mandatory for all Medicaid programs would not only save lives but also give new mothers and their children the security and support they need during the earliest days of their children’s lives.*

CATHOLIC HEALTH ASSOCIATION, CATHOLIC CHARITIES USA & USCCB[49]

Joint letter to Congress, Nov 10, 2022.

> *“The theme for the March for Life this year is ‘With Every Woman, For Every Child.’ Because that is the heart of what the pro-life movement is about: helping mothers and babies fully, humanly, flourish.*

JEANNE MANCINI[50]

President, March for Life Education and Defense Fund. January 2024 (2024 theme announcement).

> *“We need leaders … who see marriage and motherhood not as obstacles, but as civilization-building things.*

LILA ROSE[51]

Founder and President, Live Action. Live Action Women’s Summit, June 21, 2025.

Conservative Policy Scholars & Think-Tankers

> *“Republicans should prioritize assistance that can improve health outcomes for mothers and babies and ease some of the financial pressures associated with the first early months of childhood. […] Allowing Medicaid coverage of doulas … has been associated with better outcomes for new mothers.*

PATRICK T. BROWN[52]

Fellow, Ethics and Public Policy Center; contributing writer, The Dispatch. Post-Dobbs essay.

> *"A stable and predictable child tax credit could provide tremendous peace of mind to couples facing an unplanned pregnancy and make family life more achievable and affordable for working- and middle-class parents.*

W. BRADFORD (BRAD) WILCOX[53]

Senior Fellow, Institute for Family Studies; nonresident senior fellow, AEI (with Wells King, American Compass). Post-Roe essay.

> *"I think the better way for conservatives to think about this is whether or not supporting family life and supporting family choices is an appropriate intervention in the context of a system that's going to have interventions anyway.*

HENRY OLSEN[54]

Senior Fellow, EPPC; Washington Post columnist. Family Policy Matters interview.

> *"Republicans may be starting to realize that a practical anti-abortion agenda has to include policies that make raising children a viable proposition for more people, and to develop an agenda that addresses the economic, and not just the moral, dimensions of family life.*

RAMESH PONNURU[55]

Editor, National Review; AEI senior fellow; Washington Post columnist. Syndicated column, June 2022.



04. Policy Priorities

Five pillars of a federal agenda to help moms, babies, and whole families.

I. Invest Real Dollars to Strengthen Young Families and Encourage Family Formation

Help provide firm foundations for family formation and new family flourishing

- Provide tax credits for pregnant moms to help with prenatal expenses and care.
- Support working families right after childbirth with a newborn tax credit.
- Strengthen the Child Tax Credit to ease the financial burden on growing families.
- Explore providing support for working family caregivers, including for lost wages.

II. Strengthen Paid Leave and FMLA

One in four American mothers returns to work just two weeks after giving birth. No mother should have to choose between recovering from childbirth and putting food on the table. Time off and tangible economic support are essential extensions of a pro-life, pro-family agenda.

Build on the permanent paid leave tax credit

- Protect and expand the Section 45S employer paid family and medical leave tax credit, made permanent under President Trump's 2025 reconciliation bill, the largest federal paid leave policy ever enacted.
- Further expand Section 45S by raising credit rates and reducing the employee tenure requirement so more small and mid-sized employers can participate.



Empower states to lead on paid leave

- Provide grants to states to design paid family leave programs through public-private partnerships.
- Support efforts to help states harmonize procedures and ease compliance for multistate employers.

Strengthen FMLA for the families who need it most

- Fix the FMLA clock, especially for military families who move frequently.
- Explore providing protected leave and a refundable tax credit for families experiencing miscarriage or stillbirth.
- Ensure new parents are not penalized for choosing to stay home with a newborn.
- Address marriage penalties in FMLA and expand leave options for special circumstances such as NICU stays.

III. Strengthen Maternal Health Coverage and Affordability

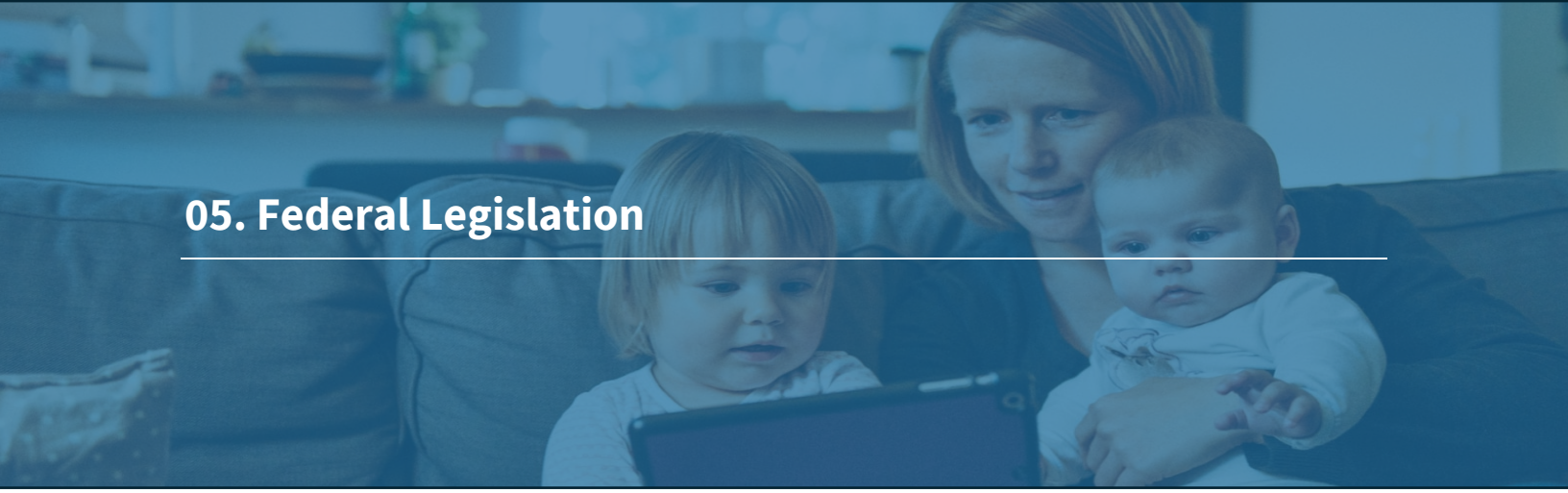
- Eliminate cost-sharing for prenatal, childbirth, and postpartum care.
- Permanently protect the 12-month postpartum Medicaid extension that has overwhelming Republican gubernatorial support as a post-Dobbs pro-life priority.
- Adopt presumptive Medicaid eligibility for pregnant women so coverage begins immediately rather than weeks into pregnancy.
- Expand telehealth access for prenatal and postpartum care, especially in rural and underserved areas, and support innovative state coverage models that ensure continuity from conception through at least one year postpartum.

IV. Close the Rural Maternal Care Gap, Invest in Maternal Mental Health, Pro-Life Centers, and Comprehensive Care

- Fully implement the $50 billion Rural Health Transformation Program, ensuring maternal health services are central to state plans.
- Support community health centers, rural hospitals, and freestanding birth centers to maintain obstetric services, and reform medical liability frameworks to stabilize rural obstetric service delivery and slow the pace of maternity ward closures.
- Fund pregnancy resource centers and maternity homes that provide wraparound services for expectant and new mothers.
- Strengthen the National Maternal Mental Health Hotline (HRSA) and explore expanding mental health screening and referral at every prenatal and postpartum visit.
- Support state efforts to establish perinatal psychiatric consultation access across state lines, and efforts to expand home-visiting models.

V. Reduce Maternal Mortality Through Data and Accountability

- Strengthen data collection on maternal deaths and disparities, and maintain and protect maternal health data collection programs, including Maternal Mortality Review Committees (MMRCs) in every state.
- Continue to support and expand the HHS Perinatal Improvement Collaborative.
- Require transparent comparable public reporting on maternal health outcomes and disparities to support state-level accountability.



05. Federal Legislation

(Correct as of June 24th, 2026, please confirm latest via Congress.gov)

House & Senate Bills

MOMS Act — More Opportunities for Moms to Succeed

S.1630 / H.R.3235

Sens. Katie Britt (R-AL); Eric Schmitt (R-MO), Kevin Cramer (R-ND), Marsha Blackburn (R-TN), John Cornyn (R-TX), Mike Crapo (R-ID), Steve Daines (R-MT), Deb Fischer (R-NE), Chuck Grassley (R-IA), James C. Justice (R-WV), James Lankford (R-OK), Roger Marshall (R-KS), David McCormick (R-PA), Jerry Moran (R-KS), Pete Ricketts (R-NE), James E. Risch (R-ID), Mike Rounds (R-SD), Tim Sheehy (R-MT), Roger F. Wicker (R-MS), Ted Budd (R-NC), Cindy Hyde-Smith (R-MS), Lindsey Graham (R-SC), Jim Banks (R-IN), Thomas Tillis (R-NC), Tommy Tuberville (R-AL), Dan Sullivan (R-AK), Bernie Moreno (R-OH), John Kennedy (R-LA)

Reps. Finstad, Brad (R-MN), Stauber, Pete (R-MN), Miller, Mary E. (R-IL), Miller, Carol D. (R-WV), Tenney, Claudia (R-NY), Webster, Daniel (R-FL), Harshbarger, Diana (R-TN), Guest, Michael (R-MS), Cammack, Kat (R-FL), Hinson, Ashley (R-IA), McGuire, John J. (R-VA), McDowell, Addison P. (R-NC), Moore, Riley M. (R-WV), Van Drew, Jefferson (R-NJ), Feenstra, Randy (R-IA), Haridopolos, Mike (R-FL), Timmons, William R. (R-SC), LaMalfa, Doug (R-CA), DesJarlais, Scott (R-TN), Harris, Andy (R-MD), Weber, Randy K. Sr. (R-TX), Harrigan, Pat (R-NC), Griffith, H. Morgan (R-VA), Fedorchak, Julie (R-ND), Hudson, Richard (R-NC)

Prenatal telehealth grants, national resource center, recovery/mental health services, pro-life alternatives.

Living Donor Protection Act

S.1552 / H.R. 4582

Sens. Tom Cotton (R-AR), Cindy Hyde-Smith (R-MS), Shelley Moore Capito (R-WV), Marsha Blackburn (R-TN), Pete Ricketts (R-NE), Thomas Tillis (R-NC), John Boozman (R-AR), James C. Justice (R-WV),

Steve Daines (R-MT), Susan M. Collins (R-ME), John Kennedy (R-LA), Kevin Cramer (R-ND), Tim Sheehy (R-MT), Roger Marshall (R-KS), Tommy Tuberville (R-AL), Lisa Murkowski (R-AK), Todd Young (R-IN), Jim Banks (R-IN), Roger Wicker (R-MS)

Reps. Don Bacon (R-NE), Troy Balderson (R-OH), Mariannette Miller-Meeks (R-IA), Joe Wilson (R-SC), Andy Barr (R-KY), David G. Valadao (R-CA), Brian K. Fitzpatrick (R-PA), Juan Ciscomani (R-AZ), Young Kim (R-CA), Michael Lawler (R-NY), Daniel Meuser (R-PA), Nicole Malliotakis (R-NY), Carol D. Miller (R-WV), Robert P. Bresnahan (R-PA), Tom Cole (R-OK), David Rouzer (R-NC), Mike Carey (R-OH), Barry Loudermilk (R-GA), Mike Kelly (R-PA), Jefferson Shreve (R-IN), Rick W. Allen (R-GA), Scott Fitzgerald (R-WI), John H. Rutherford (R-FL), Gus M. Bilirakis (R-FL), Claudia Tenney (R-NY), Derrick Van Orden (R-WI), Thomas H. Kean (R-NJ), Mike Bost (R-IL), Tracey Mann (R-KS), Bill Huizenga (R-MI), Mark E. Amodei (R-NV), Ryan Mackenzie (R-PA), Michael A. Rulli (R-OH), Beth Van Duyne (R-TX), Nick LaLota (R-NY)

The bill also expressly specifies that recovery from organ-donation surgery constitutes a serious health condition that entitles eligible employees to job-protected medical leave.

SHINE for Autumn Act

S.2858 / H.R. 5469

Sens. Jim Banks (IN), John Boozman (AR), Katie Britt (AL), Ted Budd (NC), Shelley Moore Capito (WV), Susan Collins (ME), John Cornyn (TX), Kevin Cramer (ND), Mike Crapo (ID), Steve Daines (MT), Deb Fischer (NE), Cindy Hyde-Smith (MS), John Kennedy (LA), Roger Marshall (KS), Markwayne Mullin (OK), Lisa Murkowski (AK), Pete Ricketts (NE), Jim Risch (ID), Dan Sullivan (AK), Thom Tillis (NC), Roger Wicker (MS)

Rep. Joyce, David P. (R-OH), Rep. Valadao, David G. (R-CA), Rep. Nunn, Zachary (R-IA), Rep. Carey, Mike (R-OH), Rep. Hinson, Ashley (R-IA), Rep. Mann, Tracey (R-KS), Rep. Bacon, Don (R-NE), Rep. Van Duyne, Beth (R-TX), Rep. Fitzpatrick, Brian K. (R-PA), Rep. Moolenaar, John R. (R-MI), Rep. Carter, Earl L. "Buddy" (R-GA), Rep. Cammack, Kat (R-FL), Rep. Bilirakis, Gus M. (R-FL), Rep. Moore, Tim (R-NC), Rep. Bresnahan, Robert P. (R-PA), Rep. Garbarino, Andrew R. (R-NY), Rep. Letlow, Julia (R-LA), Rep. Ciscomani, Juan (R-AZ), Rep. Malliotakis, Nicole (R-NY), Rep. Balderson, Troy (R-OH), Rep. Lawler, Michael (R-NY), Rep. Van Orden, Derrick (R-WI), Rep. Miller-Meeks, Mariannette (R-IA), Rep. Newhouse, Dan (R-WA), Rep. Dunn, Neal P. (R-FL), Rep. Kiggans, Jennifer A. (R-VA), Rep. LaLota, Nick (R-NY)

Promotes greater stillbirth data collection and reporting.

Supporting Healthy Moms and Babies Act

S.1834 / H.R.3762

Sens. Cindy Hyde-Smith (R-MS), Josh Hawley (R-MO)

Reps. Young Kim (R-CA), David Valadao (R-CA), Ryan Mackenzie (R-PA), Robert Wittman (R-VA)

Eliminates cost-sharing for prenatal, childbirth, neonatal, perinatal, and postpartum care.

Lactation Spaces for Veteran Moms Act

S.778 / H.R.1646

Sen. Lisa Murkowski (R-AK)

Rep. Ashley Hinson (R-IA)

Requires all VA hospitals to have private nursing rooms for veteran mothers.

Midwives for MOMS Act

S.1599 / H.R.6394

Sen. Lisa Murkowski (R-AK)

Rep. Ashley Hinson (R-IA)

New midwife education grant programs to expand the maternal health workforce.

Connected Moms Act

S.141 / H.R.4977

Sens. Bill Cassidy (R-LA), Todd Young (R-IN)

Reps. Maria Elvira Salazar (R-FL), Julia Letlow (R-LA), Brian K. Fitzpatrick (R-PA), Michael Lawler (R-NY-17), Zachary Nunn (R-IA)

Would require the Centers for Medicare & Medicaid Services to report, and provide resources for states, on coverage of remote physiologic devices and related services (e.g., blood glucose monitors) under Medicaid, so as to improve maternal and child health outcomes for pregnant and postpartum women.

NIH IMPROVE Act

S.3254 / H.R.6238

Sen. Katie Boyd Britt (R-AL)

Rep. Brian K. Fitzpatrick (R-PA)

Establishes the IMPROVE Initiative within the National Institutes of Health to ensure consistent funding for research on maternal care and mortality.

Dads Matter Act

S.2131 / H.R.5828

Sen. Roger Marshall (R-KS), Katie Britt (R-AL)

Rep. Juan Ciscomani (R-AZ)

Requires HHS to carry out a public awareness campaign to increase awareness of the importance of father inclusion and engagement in improving overall health outcomes during pregnancy, childbirth, and postpartum.

FAIR Leave Act

S.3321 / H.R.3404

Sen. Joni Ernst (R-IA)

Rep. Ryan Mackenzie (R-PA), Rep. Brian K. Fitzpatrick (R-PA)

Would repeal certain limits on leave for married individuals employed by the same employer so each can use their full FMA leave.

HEALING Mothers and Fathers Act

S.2418 / H.R.5397

Sens. Tom Cotton (R-AR), John Boozman (AR), Kevin Cramer (ND), Cindy Hyde-Smith (MS), James Risch (ID)

Rep. Ashley Hinson (R-IA)

Amends FMLA to add “spontaneous loss of an unborn child” (miscarriage or stillbirth) as a qualifying reason for up to 12 workweeks of unpaid, job-protected leave. Covers both the mother and her spouse. Creates a refundable tax credit of up to $2,000 per occurrence for families experiencing a stillbirth.

Fairness for Stay-At-Home Parents Act

S.1348 / H.R.2732

Sen. Mike Lee (R-UT)

Reps. Riley Moore (R-WV), Mike Kennedy (R-UT)

Amends FMLA to prohibit employers from recovering health care premiums paid during FMLA leave when an employee chooses not to return to work due to the birth of a child. Reintroduction of S.3048 from the 118th Congress, originally sponsored by then-Sen. J.D. Vance (R-OH).

Family First Act

S.1382 / H.R. 353

Sens. Banks (IN)

Reps. Blake Moore (R-UT), Tom Barrett (R-MI)

The bill would strengthen support for working families by expanding the Child Tax Credit to $4,200 for children under age 6 and $3,000 for all other children, covering up to six children per family. It also creates a new $2,800 tax credit for pregnant mothers.

Senate or House Bills

More Paid Leave for More Americans Act

H.R.3809

Reps. Stephanie Bice (R-OK), Mariannette Miller-Meeks (R-IA), Julia Letlow (R-LA), Randy Feenstra (R-IA), Ryan Mackenzie (R-PA)

The bill creates a grant program to award grants to States to carry out a paid family leave program and to establish the Interstate Paid Leave Action Network.

Healthy Moms and Babies Act

S.2289

Sen. Chuck Grassley (R-IA)

Comprehensive maternal health reforms: Medicaid/CHIP coverage, doula access, C-section disparity reporting, quality mandates.

To increase the employer tax credit for paid family and medical leave

H.R.1424

Rep. Ryan Mackenzie (R-PA).

Doubles the Section 45S employer tax credit — raising the base credit from 12.5% to 25% and the maximum from 25% to 50% of wages paid during qualifying leave — to further incentivize small and mid-sized businesses to voluntarily offer paid family and medical leave.

Ensuring Access to FMLA Leave for Military Spouses Act

H.R.4351

Reps. Don Bacon (R-NE), Brian K. Fitzpatrick (R-PA), Michael Guest (R-MS)

The bill amends the Family and Medical Leave Act of 1993 to reduce the qualifying time for a spouse of an active duty member of the Armed Forces to take leave.

NEST Act — Newborns Essentials Support Toolkit

H.R.6096

Reps. Julia Letlow (R-LA), Mariannette Miller-Meeks (R-IA), Don Bacon (R-NE), Juan Ciscomani (R-AZ), Nicholas A. Langworthy (R-NY), Robert J. Wittman (R-VA), Michael Lawler (R-NY), Maria Elvira Salazar (R-FL), Laurel M. Lee (R-FL), Ryan Mackenzie (R-PA), David G. Valadao (R-CA)

Grants for hospitals to distribute post-birth natal supply kits (“baby boxes”) with diapers, hygiene items, breastfeeding supplies, and resource info.

Flexible Leave Act

H.R. 7505

Rep. Anna Paulina Luna [R-FL-13]

The bill amends FMLA to allow all leave to be taken on an intermittent schedule.

Supporting Newborn Parents Act

H.R.8806

Reps. David Valadao (R-CA), Blake D. Moore (R-UT), Maria Elvira Salazar (R-FL), Michael Lawler (R-NY), Earl L. "Buddy" Carter (R-GA), Vince Fong (R-CA), Juan Ciscomani (R-AZ), Ryan Mackenzie (R-PA)

Creates a newborn tax credit, separate from the existing Child Tax Credit (CTC), to help new families cover the significant costs associated with welcoming a child.



06. Public Opinion

Polling data on maternal health & paid leave

Public opinion data from multiple polling firms, Cygnal, Winston Group, Echelon Insights, and Kellyanne Conway, consistently shows broad bipartisan support for maternal health and paid leave policies, with particular strength among Republican voters, parents, and Hispanic voters.

Cygnal Poll — April 2026[56]

Support for a "newborn credit" of $2,000 for working parents



Winston Group Poll — January 2026 (*Released April 2026*)[57]

Federal grants for states to establish paid leave plans



Ending out-of-pocket costs for pregnancy and childbirth





Stronger family formation & foundations (strengthened CTC)

Policy tested: $4,200 CTC for children 0–4, $3,000 for children 5–17, and a new $2,800 tax credit for pregnant mothers.



Echelon Insights — November 2024[58]

Support for "providing all workers with paid family leave"



Kellyanne Conway Poll — August 2024[59]

More likely to vote for a candidate who supports broader national paid family leave



Support a policy eliminating out-of-pocket costs for pregnancy, childbirth & postpartum care on private insurance





07. Conclusion

To be the party that champions life, we must also be the party that champions the women who carry that life. Healthy moms help ensure healthy babies and strong families, and strong families are the foundation of a strong nation. That is the through-line of this toolkit. Supporting maternal health is the natural extension of our commitment to protecting life and strengthening families — a commitment that is at once pro-life, pro-family, and pro-growth. When mothers are healthy, families thrive, communities flourish, and the workforce is stronger. The goal is not to expand the welfare state, but to remove barriers so that moms and families can succeed on their own terms.

A Five-Part Agenda

The policy priorities in this toolkit cohere into a single, federalism-friendly agenda that strengthens families:

- **Invest in young families.** Family-centered tax policy including a strengthened Child Tax Credit and a newborn tax credit, eases the financial strain of a new baby when it is felt most.
- **Strengthen paid leave and FMLA.** Paid leave is a health benefit. Building on the permanent Section 45S employer tax credit and empowering states through public-private partnerships gives employers and states the tools to support new moms.
- **Strengthen coverage and affordability.** Protecting the 12-month postpartum Medicaid extension, a policy already backed by Republican governors as a post-Dobbs pro-life priority, and adopting presumptive eligibility ensures continuity of care from conception through at least a year after birth.



- **Close the rural gap and invest in mental health.** Fully implementing the $50 billion Rural Health Transformation Program, supporting rural hospitals and pregnancy resource centers, and strengthening maternal mental health services meet mothers where they are.
- **Reduce mortality through data and accountability.** Protecting Maternal Mortality Review Committees in every state and expanding the HHS Perinatal Improvement Collaborative turn good intentions into measurable results.

Momentum Is on Our Side

The Trump Administration launched MOMS.gov, made the Section 45S paid leave tax credit permanent in the 2025 reconciliation bill, and stood up the largest investment in rural health care in decades. Republican governors from Texas to Iowa to Mississippi have extended postpartum coverage. And a growing chorus of conservative leaders, organizations, scholars, and faith communities is making the case that supporting mothers is central to a culture of life.

The Next Steps

Being pro-life means being pro-mom. A robust maternal health agenda is the proactive, necessary corollary to the work of building a culture of life: expanding access to comprehensive care for mothers and babies; easing the financial pressures on growing families; and ensuring that every mother is supported during one of the most critical and vulnerable periods of family life.



A. Appendices

Coalition assets, social copy & source repository

A1. Sample Social Media Posts

The posts below can be adapted by partner organizations for use on X, Facebook, LinkedIn, or Instagram. Tone is values-forward and shareable; adjust references and hashtags to fit your audience.

- **SAMPLE X POST**

Being pro-life means being pro-mom. That's why conservative leaders are fighting for stronger maternal health care: because healthy moms mean healthy families and a stronger America. #ProMomProLife #MaternalHealth

- **SAMPLE X POST**

49 states have now extended Medicaid coverage to 12 months postpartum. Conservative states are leading the way. Pro-life policy in action. #MaternalHealth #ProLife

- **SAMPLE X POST**

One in eight new moms faces postpartum depression. It's time to invest in maternal mental health so every mom gets the support she needs. Conservative values = supporting families at their most vulnerable. #MaternalMentalHealth

- **SAMPLE X POST**

The MOMS Act supports expectant mothers with prenatal telehealth, mental health services, and pregnancy resources. Real compassion. Real support. Real alternatives. #MOMSAct #ProLifeProMom

A2. Assets & Resources

Federal Maternal Health Legislation Tracker

- AMCHP Maternal & Child Health Federal Bill Tracker: amchp.org/mch-bill-tracker (updated regularly; tracks all MCH legislation in the 119th Congress).

Organizations

- Susan B. Anthony Pro-Life America
- Charlotte Lozier Institute
- March for Life / March for Life Action
- Students for Life
- Focus on the Family
- Concerned Women for America
- Christian Employer's Alliance (CEA)
- Ethics and Public Policy Center (EPPC)
- Institute for Family Studies (IFS)
- American Enterprise Institute (AEI)
- National Hispanic Christian Leadership Conference
- March of Dimes (bipartisan maternal health advocate)

Federal Resources

- HRSA National Maternal Mental Health Hotline: 1-833-943-5746 (24/7, free)
- CMS Rural Health Transformation Program: cms.gov
- CDC Maternal Mortality Review Information Application (MMRIA)
- White House Fact Sheet: Rural Health Transformation Program (January 2026)
- Maternal Mortality Rates in the United States (2023) https://www.cdc.gov/nchs/data/hestat/maternal-mortality/2023/maternal-mortality-rates-2023.htm
- Pregnancy Mortality Surveillance System (PMSS) — CDC data establishing that over 80% of pregnancy-related deaths are preventable https://www.cdc.gov/maternal-mortality/preventing-pregnancy-related-deaths/index.html
- Pregnancy Risk Assessment Monitoring System (PRAMS) — CDC surveillance system tracking maternal health behaviors and experiences https://www.cdc.gov/prams/

A3. Endnotes

[1] https://marchforlife.org/i-want-more-babies-jd-vance-says-at-the-march-for-life/
[2] https://governor.iowa.gov/press-release/2024-05-08/gov-reynolds-signs-bill-extending-postpartum-health-care-and-several-other-bills-law
[3] https://www.britt.senate.gov/news/press-releases/u-s-senator-katie-britt-speaks-on-the-importance-of-supporting-moms-strengthening-families-across-the-nation/
[4] Abt Associates analysis of the U.S. Department of Labor 2012 FMLA Employee Survey, reported by In These Times (2015): nearly 1 in 4 employed mothers returned to work within two weeks of giving birth. (Note: derived from a small subsample of the 2012 DOL survey.) https://www.huffpost.com/entry/nearly-1-in-4-new-mothers-return-to-work-less-than-2-weeks-after-giving-birth_n_55d308aae4b0ab468d9e3e37
[5] CDC: the majority of pregnancy-related deaths occur in the postpartum period. About 53% occur 7–365 days postpartum (MMRC 2017–2019) and roughly 69% occur on or after the day of delivery (2011–2015 PMSS); KFF (2023 data) reports 57% occur one week to one year postpartum. “Roughly 65%” approximates the share occurring at or after delivery. https://www.cdc.gov/maternal-mortality/php/data-research/
[6] https://www.facebook.com/turningpointusa/videos/443847060337445/
[7] https://tax.thomsonreuters.com/news/understanding-obbb-enhancements-to-employer-leave-and-childcare-credits/
[8] https://thehill.com/business/5262024-trump-says-bonuses-for-moms-after-they-have-child-sounds-like-a-good-idea/
[9] https://www.cnbc.com/2024/08/12/jd-vance-trump-raise-child-tax-credit.html
[10] March of Dimes, Nowhere to Go: Maternity Care Deserts Across the US (2024 report) — 35.1% of U.S. counties are maternity care deserts. https://www.marchofdimes.org/peristats/reports/united-states/maternity-care-deserts
[11] CDC, Pregnancy-Related Deaths: Data From Maternal Mortality Review Committees in 36 U.S. States, 2017–2019 (over 80% of pregnancy-related deaths determined to be preventable). https://www.cdc.gov/maternal-mortality/php/data-research/
[12] CDC Maternal Mortality Review Committees: cardiac conditions and cardiomyopathy are the leading underlying cause of pregnancy-related death among Black women; about 53% of pregnancy-related deaths occur 7 days to 1 year postpartum; and more than 75% of cardiovascular pregnancy-related deaths are preventable. https://archive.cdc.gov/www_cdc_gov/maternal-mortality/php/data-research/mmrc-2017-2019.html
[13] Rural Health Information Hub, Maternal Health (summarizing peer-reviewed Rural–Urban Disparities in Adverse Maternal Outcomes, 2016–2019: rural women at nearly twice the risk of maternal death) and CDC Pregnancy Mortality Surveillance System. https://www.ruralhealthinfo.org/topics/maternal-health
[14] CDC, Pregnancy Risk Assessment Monitoring System (PRAMS): approximately 1 in 8 mothers reports postpartum depressive symptoms, with higher rates among Medicaid enrollees (CDC MMWR; 2019 PRAMS analysis, prevalence ratio 2.34). https://www.cdc.gov/prams/
[15] https://cammack.house.gov/media/press-releases/rep-cammack-joins-colleagues-introducing-moms-act-support-expectant-mothers
[16] More than half of pregnancy-related deaths occur one week to one year postpartum: KFF (citing CDC) reports 57%; CDC MMRC 2017–2019 reports 53% occurring 7–365 days postpartum. https://www.kff.org/racial-equity-and-health-policy/racial-disparities-in-maternal-and-infant-health-current-status-and-key-issues/
[17] White House: “President Trump Honors America's Moms with New Support for Families.” whitehouse.gov
[18] https://www.hhs.gov/press-room/trump-administration-launches-moms-gov-for-new-and-expecting-mothers.html
[19] https://www.cdc.gov/about/cdc/index.html
[20] CDC/NCHS, Maternal Mortality Rates in the United States, 2024 (Health E-Stat 113, March 2026): Black 44.8, White 14.2, Hispanic 12.1, Asian 18.1 per 100,000 live births; overall 17.9. https://www.cdc.gov/nchs/data/hestat/hestat113.htm

[21] CDC Maternal Mortality Review Committees (36 states, 2017–2019) determined that 84% of pregnancy-related deaths were preventable; CDC (MMWR Vital Signs, 2019) finds preventability does not differ significantly by race. https://www.cdc.gov/mmwr/volumes/68/wr/mm6818e1.htm
[22] https://www.nih.gov/news-events/news-releases/nih-funded-study-highlights-stark-racial-disparities-maternal-deaths
[23] Black women experience severe maternal morbidity at roughly twice the rate of White women (2.7% vs. 1.3%, 2019 National Inpatient Sample). https://www.ajog.org/article/S0002-9378(23)02030-6/abstract
[24] Black mothers report higher rates of postpartum depressive symptoms but are diagnosed and treated less often (Health Affairs analysis of PRAMS data, 2020 births). https://www.healthaffairs.org/doi/10.1377/hlthaff.2023.01434
[25] https://thehill.com/business/5262024-trump-says-bonuses-for-moms-after-they-have-child-sounds-like-a-good-idea/ and also https://abcnews.com/Politics/trump-administration-5000-baby-bonus-incentivize-public-children/story?id=121094707
[26] https://www.cbsnews.com/news/jd-vance-child-tax-credit-5000-what-to-know/ and https://www.cnbc.com/2024/08/12/jd-vance-trump-raise-child-tax-credit.html
[27] https://www.britt.senate.gov/news/press-releases/u-s-senator-katie-britt-speaks-on-the-importance-of-supporting-moms-strengthening-families-across-the-nation/
[28] https://cammack.house.gov/media/press-releases/reps-cammack-castor-carter-degette-kelly-mackenzie-introduce-bill-prevent
[29] https://fischbach.house.gov/2025/5/rep-fischbach-introduces-the-moms-act-to-support-expectant-mothers-and-their-families
[30] https://www.help.senate.gov/rep/newsroom/press/icymi-cassidy-receives-a-pro-life-rating-for-work-to-protect-life
[31] https://www.grassley.senate.gov/news/news-releases/grassley-hassan-reintroduce-bill-to-improve-maternal-and-child-health-services
[32] https://gov.texas.gov/news/post/governor-abbott-hhsc-announce-medicaid-chip-postpartum-coverage-extension-to-12-months
[33] https://www.gbtribune.com/news/local-news/senator-marshall-joins-senator-britt-in-introducing-moms-act-to-support-women-strengthen-families/
[34] https://www.banks.senate.gov/news/press-releases/senator-jim-banks-introduces-the-family-first-act-to-expand-child-tax-credit/
[35] https://governor.iowa.gov/press-release/2024-05-08/gov-reynolds-signs-bill-extending-postpartum-health-care-and-several-other-bills-law
[36] https://www.mississippifreepress.org/new-pro-life-agenda-reeves-signs-year-of-postpartum-medicaid-coverage-into-law/
[37] https://www.facebook.com/turningpointusa/videos/443847060337445/
[38] https://www.thedailybeast.com/give-new-moms-medicaid-for-a-year
[39] https://www.theblaze.com/shows/relatable/trumps-new-momsgov-site-rocksexcept-for-this-one-flaw
[40] https://www.iwf.org/2019/03/12/how-parental-leave-aids-families/
[41] https://www.osvnews.com/2023/07/10/as-u-s-maternal-mortality-rises-pro-life-leaders-call-for-care-for-her-act/
[42] https://townhall.com/columnists/tina-whittington/2025/05/24/now-is-the-time-to-champion-the-child-tax-credit-n2657585
[43] https://cammack.house.gov/media/press-releases/rep-cammack-joins-colleagues-introducing-moms-act-support-expectant-mothers
[44] https://www.newsweek.com/how-protect-unborn-life-post-roe-america-opinion-1668021
[45] https://www.catholicnewsagency.com/news/256604/leading-pro-life-organization-lays-out-political-strategy-for-2024
[46] https://fischbach.house.gov/2024/1/supporting-pregnant-and-parenting-women-and-families-act-passes-ways-and-means-markup
[47] https://www.washingtontimes.com/news/2023/sep/8/benjamin-watsons-open-letter-mexico-dont-follow-ou/

[48] https://www.usccb.org/resources/letter-congress-maternal-health-may-8-2024
[49] https://www.usccb.org/resources/letter-congress-medicaid-postpartum-coverage-and-childrens-health-insurance-november-10
[50] https://www.kofc.org/en/news-room/columbia/2024/march/marching-with-every-woman-child.html
[51] https://www.liveaction.org/news/lila-rose-inspires-live-action-womens-summit
[52] https://thedispatch.com/article/the-work-is-just-beginning-for-the/
[53] https://americancompass.org/what-family-policy-should-look-like-in-post-roe-america/
[54] https://www.ncfamily.org/what-do-americans-think-about-paid-family-leave/
[55] https://wacotrib.com/opinion/columnists/ramesh-ponnuru-a-conservative-plan-to-strengthen-families-post-roe/article_e9b0fe97-bf15-5b5c-9246-c117ca66521a.html
[56] https://drive.google.com/file/d/1ZFwuF8pnxdX8lyNqLsT4RfRKszlBMOed/view pp.4-5
[57] https://www.winstongroup.net/wp-content/uploads/2026/04/Key-Findings-From-National-Survey-on-Family-Legislative-Proposals.pdf
[58] https://echeloninsights.com/insights/in-the-news/apv-survey
[59]https://static1.squarespace.com/static/6792a330552f3352171d4ccb/t/67fecbc65fae9977d19a1450/1744751558912/CG+Tax+Simplification+Poll+%5BFINAL%5D.pdf