



## Support Midwifery and Birth Center Funding in FY26

Maternal and infant health care in the US is in crisis, with unacceptably poor birth outcomes, escalating costs of care, and a growing shortage of maternity providers and birthing facilities. In order to improve maternity care outcomes, lower costs, and increase access to maternity care providers and birth settings in all communities, we ask that you support funding for midwifery education and birth center expansion in the Fiscal Year 2026 Labor, HHS and Education appropriations legislation.

### Background

The US spends significantly more per capita on childbirth than any other industrialized nation, and yet despite this investment, America continues to rank far behind almost all other developed countries in birth outcomes for both mothers and babies. We have unacceptably high rates of maternal and infant mortality, preterm births, and severe complications of pregnancy, and these tragedies all disproportionately impact communities of color and rural areas. Compounding these dire statistics is a mounting shortage of both trained maternity care providers and hospital birthing units, creating “maternity care deserts” that impact almost a third of all US counties, and leave a growing number of rural and underserved communities with no access to maternity care.

Midwives and birth centers are widely cited as a critical part of the solution to addressing these problems in our maternity care system.

- Decades of research have shown that women cared for by midwives have excellent birth outcomes, higher levels of satisfaction, and lower costs due to fewer unnecessary interventions (Vedam et al., 2018; Sandall et al., 2016, NASEM, 2020)
- Multiple studies have demonstrated improved outcomes from midwifery-led care in birth centers when compared to outcomes with usual care (Rooks et al., Stapleton et al., Jolles, 2016, Jolles, 2022).
- The Strong Start Initiative was a multi-year CMS-funded project to determine whether different models of prenatal care could reduce rates of preterm birth and other complications of pregnancy. The national evaluation led by the Urban Institute showed improved outcomes for mothers and babies, reduction of preterm birth and NICU admissions, and cost savings of \$2000 for every mother baby pair due to the decreased necessity of medical interventions (CMS, 2019; Dubay et al., 2020; Alliman et al., 2019).

Despite this compelling research supporting midwives and birth centers as viable and cost-effective solutions to this nation’s maternity care crises, midwives and birth centers are underutilized in this country. Midwives currently attend less than 10 percent of all births in the US, compared to countries like Great Britain, Sweden, Norway and France where midwives oversee more than half of all maternity care. And even though birth center births have increased by 17.5% since 2019, only 255 of 3143 US counties currently have birth centers (March of Dimes, 2022).

## Solutions

Funding to grow the midwifery workforce is a cost-effective solution to ensure better birth outcomes in the US. Federal dollars to expand existing education programs and develop new ones, provide essential student scholarship support, and build and sustain the preceptor workforce, will ensure a robust midwifery workforce sufficient and prepared to meet the urgent needs of the childbearing population in the US.

Birth centers are health care facilities that are often small woman-owned businesses or small nonprofits. Rarely they are owned by health care networks or larger systems, and therefore access to funding for start-up is often a barrier. There are currently 400 birth centers in the US with 75 in development. Availability of grants for start-up funding would speed the process of expanding the numbers of birth centers in underserved and rural communities.

## Request

In order to expand access to both midwives and birth centers in this country and improve outcomes for mothers and babies in all communities, we ask that you support the following funding requests:

- Continue the **\$5 million set-aside for midwife training**, within the total funding for the Title VII Scholarships for Disadvantaged Students, to educate midwives to address the national shortage of maternity care providers in the maternity care workforce
- Continue the **\$8 million to increase the number of Certified Nurse-Midwives (CNMs)**, within the Title VIII Advanced Nursing Education Program. The program will fund accredited nurse-midwifery programs to award scholarships to students and registered nurses, with a focus on practitioners working in rural and underserved communities, to cover the total cost of tuition for the duration of the nurse-midwifery program. The program will also support the planning and development of new midwife training programs.
- Set aside **\$2 million within the Title V Maternal and Child Health Block Grant, Community Integrated Service Systems (CISS) grant program, to fund birth center start up grants**. These grants will support renovation and equipment purchase to assist in the development of birth centers in underserved or rural communities.

## For more information please contact:

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