Dear XX:

Postpartum depression (PPD) is the most common complication of childbirth and can affect families in a range of ways that include emotional and physical wellbeing and economic security. In Texas alone, 68,000 mothers of infants are likely to suffer from the condition every year.¹

Thankfully, state lawmakers have demonstrated their commitment to the seriousness of the condition by including PPD screening and treatment under the Healthy Texas Women program² and by making mental health, including postpartum depression, a key focus of interim hearings.³

PPD can be devastating to the economic growth and security of families across Texas. Postpartum depression has been associated with decreased employment and income in affected mothers.⁴ In addition, untreated PPD has also been tied to negative outcomes for children—such as delays in language, cognitive, and motor development and other vital components of school readiness—that can impair the ability of our youngest Texans to achieve economic security as they grow older.⁵

I am committed to the wellbeing of Texas’ children and families. I write in support of a state budget rider that would help the state to seek out a new federal grant opportunity to expand existing, successful programs focusing on PPD and develop new, innovative PPD screening and treatment initiatives without the state incurring significant costs.

The 21st Century Cures Act, a federal law recently passed with strong bipartisan support, seeks to facilitate medical research and improve treatments for chronic conditions.⁶ The law includes several mental health provisions, including one authorizing federal grants to states to develop, maintain, or expand programs for screening and treatment of postpartum depression. Up to $5 million total grant funding will be available to distribute to at least three states annually.

Through this grant opportunity, Texas would have significant flexibility to expand and implement programming for early detection and treatment of postpartum depression.⁷ The state could choose to use this funding, for example, to expand trainings for providers to screen for postpartum depression, explore telehealth strategies to reach more mothers, increase capacity at Local Mental Health Authorities and community health centers to offer mental health services for new mothers, or strengthen referral avenues for those diagnosed with the condition.
Whatever strategies the state elects to pursue under the grant, this investment would represent a significant step forward for Texas families. I welcome the opportunity to work with you to improve the health and wellbeing of families across the state.

Sincerely,

ADD YOUR NAME

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vii Ibid.