

Dear Chair Wicklund and Chair Liebling,

We ask for your support and passage of SF 1303 in this coming legislative session. Stillbirth is a tragedy that no person or family should have to experience — and with this bill, we have the power to take action and prevent them.

[SF 1303](#)/HF 779 addresses stillbirth prevention through a tracking fetal movement pilot program (Count the Kicks). Tracking fetal movement is an important part of pre-natal care in the third trimester. It can help the expecting parent to get to know their baby's normal movement patterns and speak up if there is a concern.

The program would empower parents to take preventative action for the health of their pregnancy and educate health care providers on the importance of fetal movement indicators. In a health care system where BIPOC patients are often dismissed and under-treated, this two-pronged approach would equip both patients and providers with the resources they need to ensure positive pregnancies and birth outcomes for all.

Every year, over 21,000 babies in the US are born still, according to the [CDC](#). A disproportionate number of these tragedies occur in Native Hawaiian, Pacific Islander, Black, American Indian or Alaska Native families. Research from the [American College of Obstetrics and Gynecology](#) shows that the confluence of systemic racism in housing, education, employment, health care, criminal justice, and beyond contribute to these disproportionately high rates of stillbirth.

The bill provides \$125,000 (will be amended to \$200,000) in grant funding to support a healthy pregnancy and stillbirth prevention pilot program in FY24-26 (will be amended to FY25-27). The program would provide education and resources for expecting parents and health care providers. Its outcomes would give us a roadmap for future healthy pregnancy initiatives in Minnesota.

Expecting parents would receive information about the importance of tracking fetal movements in the third trimester of pregnancy through trusted community organizations, hospitals, and maternal health providers. These resources would help expecting parents understand when to seek medical care for their pregnancy based on fetal movements. Health care providers would receive continuing education materials that would encourage them to take their patients seriously and elevate concerning reports to the next level of health care.

At the end of the program, the Legislature would receive a report on the program's efficacy, lessons and recommendations for future action, and data on changes in statewide fetal death rates; fetal death rates among American Indian, Black, Hispanic, and Asian Pacific Islander populations; and fetal death rates in zip codes with high stillbirth rates.

Don't hesitate to reach out if you have any questions or thoughts you would like to share with us.

Thank you for your consideration,

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