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Background

According to the CDC, stillbirth is truly a public health crisis, with approximately 21,000 babies born still every year in the United States.¹ **That's about 58 babies every day.** Women who experience a stillbirth are also more likely to die after delivery and severe morbidity is nearly five times more common than in women whose babies are born alive.



The annual number of stillbirths in the U.S. far exceeds the number of deaths among children aged 0-14 years from preterm birth, SIDS, accidents, drownings, guns, fire, and flu combined.



Stillbirth rates have changed very little over the last 15 years. In the last two decades, the U.S. stillbirth rate declined by a negligible 0.5% per year, putting our progress at 183rd out of 195 countries globally.²

2X

There are longstanding and persistent racial and ethnic disparities with Black and Native American families experiencing stillbirths at 2 times the rate of their White counterparts.³

25%

Studies indicate a minimum of 25% of U.S. stillbirths are preventable. This could save the lives of at least 5,250 babies each year.⁴



Vital records (fetal death certificates) are the only national source of data, but definitions vary by state and can suffer from poor quality.

Bill Summary

The **SHINE for Autumn Act** will focus on preventing stillbirths through enhanced data collection, analysis, reporting, and research.

This bill will make critical steps to invest in research and data collection to better understand stillbirth in the United States, with the goal of lowering the U.S. stillbirth rate.

Additionally, it will provide critical resources to the CDC, NIH, and local state departments of health to improve stillbirth data collection and increase education and awareness around the issue of stillbirth. It's the beginning of a longer-term solution towards the prevention and reduction of incidences of stillbirth in our country.

Key funding authorizations include:

1. **\$5 million per year** to provide grants to states to support data collection and reporting on stillbirths and contributing risk factors.
2. **\$3 million per year** for a research fellowship on stillbirth that will include research and training on fetal autopsies and improved education, research, and data collection. Health and Human Services (HHS) would report to Congress on the program's progress and effectiveness within five years of the bill's enactment.
3. **\$1 million per year** for HHS to, in coordination with healthcare providers and community groups, develop guidelines and educational materials for state departments of health and vital statistics units on stillbirth data collection and data sharing.

On December 8, 2021, the bill passed the U.S. House of Representatives with overwhelming bipartisan support of 408 votes for and 18 votes against.

Who is Autumn?



Autumn Joy was born still on July 8, 2011. Her death tragically impacted her family and propelled her mom, and others like March of Dimes, to shed light on this heartbreaking maternal and family health crisis.

1. Centers for Disease Control and Prevention. (2022, October 4). Stillbirth data and statistics. Centers for Disease Control and Prevention. Retrieved March 13, 2023, from <https://www.cdc.gov/ncbddd/stillbirth/data.html>
2. 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, February). Potentially preventable stillbirth in a diverse U.S. cohort. *Obstetrics and gynecology*. Retrieved March 13, 2023, from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5785410/>
3. Stillbirth. March of Dimes. (n.d.). Retrieved March 13, 2023, from <https://www.marchofdimes.org/find-support/topics/miscarriage-loss-grief/stillbirth>
4. Flenady V;Wojcieszek AM;Middleton P;Ellwood D;Erwich JJ;Coory M;Khong TY;Silver RM;Smith GCS;Boyle FM;Lawn JE;Blencowe H;Leisher SH;Gross MM;Horey D;Farralles L;Bloomfield F;McCowan L;Brown SJ;Joseph KS;Zeitlin J;Reinebrant HE;Cacciatore J;Ravalid C;Vannac. (n.d.). Stillbirths: Recall to action in high-income countries. *Lancet* (London, England). Retrieved March 13, 2023, from <https://pubmed.ncbi.nlm.nih.gov/26794070/>