

112TH CONGRESS  
1ST SESSION

# S. 1131

To authorize the Secretary of Health and Human Services, acting through the Director of the Centers for Disease Control and Prevention, to establish and implement a birth defects prevention, risk reduction, and public awareness program.

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## IN THE SENATE OF THE UNITED STATES

MAY 26, 2011

Mrs. HAGAN (for herself, Mr. BROWN of Ohio, Ms. LANDRIEU, and Mr. CONRAD) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

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## A BILL

To authorize the Secretary of Health and Human Services, acting through the Director of the Centers for Disease Control and Prevention, to establish and implement a birth defects prevention, risk reduction, and public awareness program.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

3       **SECTION 1. SHORT TITLE.**

4       This Act may be cited as the “Birth Defects Preven-  
5       tion, Risk Reduction, and Awareness Act of 2011”.

1 **SEC. 2. BIRTH DEFECTS PREVENTION, RISK REDUCTION,**  
2 **AND AWARENESS.**

3 (a) IN GENERAL.—The Secretary shall establish and  
4 implement a birth defects prevention and public awareness  
5 program, consisting of the activities described in sub-  
6 sections (c) and (d).

7 (b) DEFINITIONS.—In this Act:

8 (1) The term “organization” means an organi-  
9 zation with a demonstrated ability to provide, and  
10 experience providing, specialized information on pre-  
11 natal exposures and breastfeeding exposures with  
12 oversight by a licensed health care provider.

13 (2) The term “pregnancy and breastfeeding in-  
14 formation services” includes only—

15 (A) information services to provide accu-  
16 rate, evidence-based, clinical information re-  
17 garding maternal exposures during pregnancy  
18 that may be associated with birth defects or  
19 other health risks, such as exposures to medica-  
20 tions, chemicals, infections, foodborne patho-  
21 gens, illnesses, nutrition, or lifestyle factors;

22 (B) information services to provide accu-  
23 rate, evidence-based, clinical information re-  
24 garding maternal exposures during  
25 breastfeeding that may be associated with  
26 health risks to a breast-fed infant, such as ex-

1 posures to medications, chemicals, infections,  
2 foodborne pathogens, illnesses, nutrition, or life-  
3 style factors;

4 (C) the provision of accurate, evidence-  
5 based information weighing risks of exposures  
6 during breastfeeding against benefits of  
7 breastfeeding; and

8 (D) the provision of information described  
9 in subparagraph (A), (B), or (C) through coun-  
10 selors, Web sites, fact sheets, telephonic or elec-  
11 tronic communication, community outreach ef-  
12 forts, or other appropriate means.

13 (3) The term “Secretary” means the Secretary  
14 of Health and Human Services, acting through the  
15 Director of the Centers for Disease Control and Pre-  
16 vention.

17 (c) NATIONWIDE MEDIA CAMPAIGN.—In carrying out  
18 subsection (a), the Secretary shall conduct or support a  
19 nationwide media campaign to increase awareness among  
20 health care providers and at-risk populations about preg-  
21 nancy and breastfeeding information services.

22 (d) GRANTS FOR PREGNANCY AND BREASTFEEDING  
23 INFORMATION SERVICES.—

1           (1) IN GENERAL.—In carrying out subsection  
2           (a), the Secretary shall award grants to organiza-  
3           tions for any of the following:

4                   (A) INFORMATION SERVICES.—The provi-  
5                   sion of, or campaigns to increase awareness  
6                   about, pregnancy and breastfeeding information  
7                   services.

8                   (B) SURVEILLANCE AND RESEARCH.—The  
9                   conduct or support of—

10                           (i) surveillance of, or research on—

11                                   (I) maternal exposures that may  
12                                   influence the risk of birth defects, pre-  
13                                   maturity, or other adverse pregnancy  
14                                   outcomes; and

15                                   (II) maternal exposures that may  
16                                   influence health risks to a breastfed  
17                                   infant; or

18                           (ii) networking to facilitate surveil-  
19                   lance or research described in this sub-  
20                   paragraph.

21           (2) PREFERENCE FOR CERTAIN ORGANIZATIONS  
22           IN CERTAIN STATES.—The Secretary, in making any  
23           grant under this subsection, shall give preference to  
24           organizations, otherwise equally qualified, operating  
25           in States that have or had a pregnancy and

1       breastfeeding information service in place on or after  
2       January 1, 2006.

3           (3) MATCHING FUNDS.—The Secretary may  
4       award a grant under this subsection only to an orga-  
5       nization that agrees, with respect to the costs to be  
6       incurred in carrying out the grant activities, to make  
7       available (directly or through donations from public  
8       or private entities) non-Federal funds toward such  
9       costs in an amount that is not less than 25 percent  
10      of the amount of the grant.

11          (4) COORDINATION.—The Secretary shall en-  
12      sure that activities funded through a grant under  
13      this subsection are coordinated, to the maximum ex-  
14      tent practicable, with other birth defects prevention  
15      and environmental health activities of the Federal  
16      Government, including with respect to pediatric envi-  
17      ronmental health specialty units and children’s envi-  
18      ronmental health centers.

19          (e) EVALUATION.—In furtherance of the program  
20      under subsection (a), the Secretary shall provide for an  
21      evaluation of pregnancy and breastfeeding information  
22      services to identify efficient and effective models of—

23           (1) providing information;

24           (2) raising awareness and increasing knowledge  
25      about birth defects prevention measures;

1           (3) modifying risk behaviors; or

2           (4) other outcome measures as determined ap-  
3       propriate by the Secretary.

4       (f) AUTHORIZATION OF APPROPRIATIONS.—To carry  
5 out this Act, there are authorized to be appropriated  
6 \$5,000,000 for fiscal year 2012, \$6,000,000 for fiscal year  
7 2013, \$7,000,000 for fiscal year 2014, \$8,000,000 for fis-  
8 cal year 2015, and \$9,000,000 for fiscal year 2016.

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