Maternal and Child Health

The Issue
Improving the health and well-being of mothers and young children is an important societal goal. Pregnancy and early life are critical times to ensure healthy development, address health risks, and prevent future problems for women and their children.¹

Why It’s Important
Data shows that maternal and child health in the United States is much worse than it should be for a wealthy country with advanced health care services. A significant number of pregnancies in the United States are unplanned, impacting maternal and infant health and family economic prosperity.¹¹ Maternal and infant mortality rates are high, and trends are moving in the wrong direction. Maternal mortality in the United States has more than doubled since 1987 and many women have complications during and after pregnancy, including 1 in 10 women who experience pregnancy-related depression.³⁹ Over 23,000 infants died before the age of 1 in the United States in 2016.⁴¹ For each of these indicators, racially and ethnically diverse families and low-income families are more highly impacted than other families.⁵ Because maternal and child health is impacted by a confluence of health care, social, and economic issues, multifaceted approaches are needed to improve maternal and child health.

Considerations for State Policymakers
Federal resources to support maternal and child health are provided to states through Maternal and Child Health Block Grants; Maternal, Infant, and Early Childhood Home Visiting Program, investments in Federally Qualified Health Centers, and Medicaid and Children’s Health Insurance Program. In addition to these federal resources, states have flexibility to design, implement, and fund policies and programs to meet the unique needs of women and children in their state.

1. Help Women and Families Prevent Unplanned Pregnancies
About half of all pregnancies in the United States are unplanned. Research has shown that women and children are healthier, achieve better educational outcomes, and have greater financial stability when children are born as a result of a planned pregnancy.¹⁸ States can act to prevent unplanned pregnancies through several strategies.⁷

- **Provide education about the importance of planned pregnancy** through various state agencies and programs using multiple modalities, including in-person, peer networks, mass and social media. The Community College System in Mississippi, under direction from the legislature, has an unplanned pregnancy prevention action plan. Unplanned pregnancy prevention materials are included in student orientation and academic course materials, when appropriate.

- **Increase access to contraception** through comprehensive, statewide plans, as seen in Delaware and Colorado to increase access to the full range of contraceptive methods—
including long-acting reversible contraceptives (LARCs)—for all women and provide training and technical assistance to health care providers across the state. States can change Medicaid program rules and incent private insurers to remove barriers to LARCs, such as prior authorization, and offer providers reimbursement for contraceptive screening, counseling, provision, and follow-up.\textsuperscript{viii}

2. Act to Reduce Maternal and Infant Deaths and Complications

The causes of maternal and infant mortality and morbidity are multifaceted and complex, and therefore require collaboration among multiple state agencies and community partners. States are pursuing many approaches to reducing maternal and infant deaths and improving maternal and infant health.

- Establish and strengthen statewide, cross-agency task forces to evaluate the circumstances, causes, and missed opportunities for intervention for each maternal and infant death in order to improve care and reduce mortality. These task forces work best when they include health care providers, hospitals, public health agencies, community organizations, and families impacted by maternal and infant mortality and complications.

- Provide tools, technical assistance, and accountability mechanisms to health care providers to end preventable morbidity, mortality, and racial disparities in maternal and infant health. The California Maternal Quality Care Collaborative is a multistakeholder organization that uses research, quality improvement toolkits, statewide outreach collaboratives, and its innovative Maternal Data Center to improve health outcomes for mothers and infants. Since the Collaborative’s inception, California has seen maternal mortality decline by 55 percent between 2006 to 2013, while the national maternal mortality rate continued to rise.

- Directly engage and support mothers through programs such as Labor of Love, a program of the Indiana State Department of Health, which provides dedicated information and a referral helpline for moms, and a mobile app, Liv, which is full of pregnancy-related resources.


There is strong evidence that pregnancy-related depression and other adverse childhood experiences can have a significant impact on the health of children and families.\textsuperscript{x} States can impact the lifelong health of women and children if mental health needs are identified and treated early.

- Reduce adversity and build resilience by screening for and addressing toxic stress and providing early interventions in families. Vermont has created a permanent Director of Trauma Prevention and Resilience Development within the Office of the Secretary in the Agency of Human Services to direct and coordinate a systemic approach across state government to build childhood resilience and mitigate toxic stress.

- Increase identification of and treatment for pregnancy-related depression and infant social and emotional development by providing services to mothers and infants; offering training resources for health, human services and educational professionals; and creating incentives to improve access and quality of care by health care providers.

- Support new parents through home visiting programs—such as Healthy Families America, Nurse-Family Partnership, and Parents as Teachers—that can improve family functioning and child development; reduce health risk behaviors and child maltreatment; decrease racial/ethnic disparities; and even improve economic security.\textsuperscript{x}
Endnotes


VI Houston Su, J. Addo F.


