Maternal Heath

Promoting & Protecting the Health of Iowans

Health Promotion and Chronic Disease Prevention
Phone: 1800-383-3826
www.idph.state.ia.us/hpcdp/maternal_health_services.asp

IDPH Iowa Department of Public Health

Crystal was 15 years old, pregnant, homeless, and a junior in high school when she first met her maternal health nurse. Crystal's mother has a long history of mental illness. Crystal has been caretaker to her bi-polar mother and younger siblings. The maternal health nurse partnered with Crystal throughout her pregnancy, finding housing and educating Crystal about pregnancy, child rearing, and goal setting for the future. Crystal also suffered from depression; her nurse arranged counseling. Last year, Crystal delivered a healthy baby girl and graduated from high school. Crystal is now working and attending class at DMACC. She feels that the Maternal Health program has had a positive impact on her and her baby's life.

Did you know?

The Maternal Health program improves the health of mothers and babies by teaching mothers about healthy lifestyle choices and nutrition, assessing oral health, screening for maternal health, mental health, and pregnancy risk factors, and improving access to prenatal care. We promote breastfeeding, as well, which improves infant health, immunity, growth, and development.

Why are Maternal Health programs important to promoting and protecting the health of Iowans?

- Early and adequate prenatal care (in the first 3 months of pregnancy) is important to a healthy pregnancy and birth. It helps reduce illness and disability through health care advice and by identifying and managing chronic or pregnancy related risks.
- According to the Iowa Barriers to Prenatal Care Survey, most Iowa women receive prenatal care; yet, low-income, teen, and minority women are more likely to receive prenatal care after the 3rd month. Barriers include financial, transportation, and a lack of knowledge that prenatal care is important. The Maternal Health program works to overcome these barriers.
- Premature, low birthweight babies have a higher risk of death and disabilities. Costs for caring for these babies are up to 15 times higher. In 2009, there were 4,467 preterm Iowa births representing 11.3% of live births. Iowa's rate is slightly better than the national rate of 12.2 % of live births in 2009. Maternal Health programs provide education and counseling to decrease risk factors including tobacco cessation counseling, nutrition counseling to control glucose levels in women with diabetes, referrals for hypertension treatment, and improving access to prenatal care.
- Maternal health agencies have worked hard to improve the number of pregnant women who have a "medical home" – a regular source of prenatal medical care by a physician or midwife – from 68% in 2002 to 87% in 2011.
- Domestic and sexual violence are pervasive problems that have major impact on health conditions. Research has shown that when women are provided with support and information about their safety options, they are more likely to take steps toward safety in their interpersonal relationships. Iowa's Project Connect works to provide this information.

Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

Promote healthy behaviors

What do we do?

IDPH funds 21 Iowa maternal health agencies that provide services to pregnant and postpartum women. For a map with contact information for these agencies, go to www.idph.state.ia.us/hpcdp/maternal_health_services.asp. Services include:

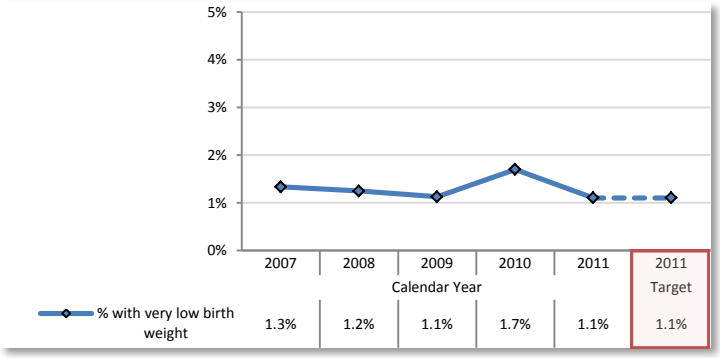
- ✔ Help in finding a medical home.
- ✔ Prenatal and postpartum health education.
- ✔ Transportation to medical visits.
- ✔ Education about lifestyle choices to improve pregnancy outcomes.
- ✔ Breastfeeding education and support.
- ✔ Psychosocial assessment including screening for perinatal depression.
- ✔ Nutrition assessment and education.
- ✔ Oral health assessment and help in finding a dentist to provide a regular source of oral health care.
- ✔ Postpartum home visits by registered nurses to assess the health of both new mothers and their babies.
- ✔ Family needs assessment and referral to community resources to help the family.
- ✔ Pregnant women may qualify for help from publicly funded health insurance (Medicaid) even if they were not eligible before pregnancy. Program staff help families find out if they qualify for services at a reduced or no cost.
- ✔ Referral to family planning and child health agencies after delivery to support the family's ongoing health care needs.

In addition, IDPH administers two maternal health specific projects.

- ✔ Project Connect is a violence prevention initiative and funded by the Office on Women's Health of the U.S. Department of Health and Human Services in conjunction with Futures Without Violence. It is designed to identify, respond to, and prevent domestic and sexual violence, as well as, promote an improved public health response to abuse.
- ✔ Iowa's Prenatal Risk Assessment Monitoring System (PRAMS), a part of the Centers of Disease Control and Prevention initiative, strives to reduce infant mortality and low birth weight. It is a population based surveillance system designed to identify and monitor selected maternal behaviors and experiences before, during, and after pregnancy.

How do we measure our progress?

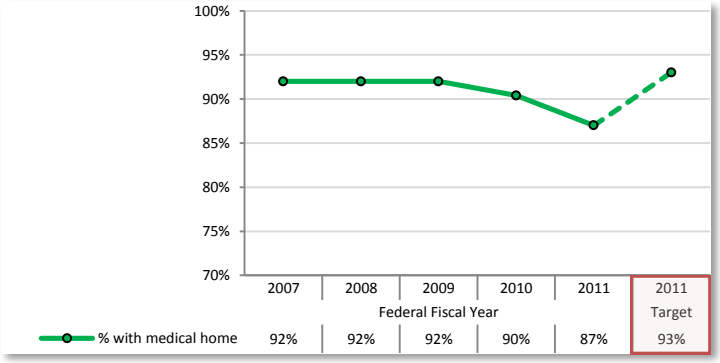
❶ **Percent of very low birth weight infants (less than 1500 grams) among all live births.**



Data Source: Vital statistics. Data are available annually.

How are we doing? The percent of very low weight births has remained steady from 2002 to 2011. Data for 2011 shows that 1.1% of Iowa births were very low birth weight births, which is a decrease in the number of very low birth weight births from 2010.

❷ **Percent of women served in the maternal health program who report a medical home.**



Data Source: Women's Health Information System. Data are available annually. FFY 2012 data are not yet available

How are we doing? In 2002, the rate was 68% with a medical home. In 2011, our rate of women reporting a medical home was 87%, which is a slight decrease from last year. It did not meet our target, but is a 19% increase since 2002.

What can Iowans do to help?

1. Health care professionals can refer Medicaid eligible/low-income women for maternal health services. Call the Healthy Families Line at 1-800-369-2229 or www.idph.state.ia.us/hpcdp/maternal_health_services.asp
2. Plan to improve your health before you are pregnant. This offers the best chance of having a health pregnancy and a healthy baby. Eat a balance diet, give up smoking, stop drinking alcohol, begin taking folic acid, see a dentist, and take care of your teeth.
3. Learn more about preventing family violence at www.endabuse.org
4. Learn more about PRAMS at www.cdc.gov/prams

Expenditures

General fund, federal funds, & other receipts*; State funds are used for a 75% match for the Title V Block Grant: K05-0507/0523/0651; K09-0989; 0153-0304/ 0454/ 0566/1980

	State Fiscal Year 2011 Actual	State Fiscal Year 2012 Actual	State Fiscal Year 2013 Estimate
State funds	$313,714	$296,206	$369,082
Federal funds	$1,275,642	$1,343,917	$1,594,505
Other funds*	$82,856	$82,889	$61,446
Total funds	**$1,672,212**	**$1,723,012**	**$2,025,033**
FTEs	2.88	3.69	3.85

Note: Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.

Iowa Department of Public Health ◇ Division of Health Promotion and Chronic Disease Prevention ◇ Maternal Health

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