

WHITE PAPER

BEYOND MEDICINE: MATERNAL HEALTH CARE

Harnessing Food
Access and Health
Coaching



EXECUTIVE SUMMARY

The United States is facing a maternal health crisis with a significant increase in the number of pregnancy related deaths. Between 1987 and 2021, the mortality rate surged from 7.2 deaths per 100,000 live births to 32.9 deaths per 100,000 live births.¹ Racial and geographical disparities exacerbate this problem. Black women are three times more likely to die from pregnancy-related causes than their white counterparts and Indigenous women face approximately double the risk.² Rural Americans are experiencing maternal mortality rates twice as high as those in urban areas.³

Medicaid plays a vital role in providing access to healthcare for pregnant women, ensuring healthier outcomes for mothers and babies. Medicaid is the largest source of health coverage for pregnant women in the United States. Medicaid utilization is higher in rural areas among young women, among women with lower levels of educational attainment, and among Hispanic, Black, American Indian and Alaska Native women.

In the Medicaid population, millions of individuals, including pregnant women and new mothers, face challenges in maintaining their health due to limited access to nutritious food. Federal and state legislation has expanded and stabilized Medicaid access during the



postpartum phase. Medicaid covers nearly half of all births across the nation. Historically, numerous pregnant women lost their Medicaid coverage after a 60-day postpartum period. However, with the enactment of the American Rescue Plan Act (ARPA) of 2021, states were given a new opportunity to extend postpartum coverage for a full year and lasting for a duration of five years.

Addressing food insecurity and improving access to nutritious food is vital for enhancing maternal health in the Medicaid population. To achieve this, a multi-faceted approach is required, involving personalized food access, cultural sensitivity across the health continuum, and nutrition coaching.

¹ "Pregnancy Mortality Surveillance System," Centers for Disease Control and Prevention (CDC).

² Emily E. Petersen et al. "Racial/Ethnic Disparities in Pregnancy-Related Deaths — United States, 2007–2016," *MMWR Morbidity and Mortality Weekly Report* 68, no. 35 (2019): 762–65.

³ Katy Backes Kozhimannil et al., "Rural-Urban Differences in Severe Maternal Morbidity and Mortality in the U.S., 2007–15," *Health Affairs* 38, no. 12 (Dec. 2019): 2077–85; Peter T. Merkt et al., "Urban-Rural Differences in Pregnancy-Related Deaths, United States, 2011–2016," *American Journal of Obstetrics and Gynecology* 225, no. 2 (Feb. 25, 2021): 183.e1–16; and Lindsay K. Admon et al., "Racial and Ethnic Disparities in the Incidence of Severe Maternal Morbidity in the United States, 2012–2015," *Obstetrics and Gynecology* 132, no. 5 (2018): 1158–66.

THE MATERNAL HEALTH PROBLEM



The United States has a maternal health problem:

- The United States is ranked last globally for maternal mortality when compared to similarly wealthy countries.⁴
- The severe health complications during pregnancy and childbirth, known as maternal morbidity, is “estimated to cost the U.S. over \$32 billion from conception through age 5 for all children born in a single calendar year.”^{5 6}
- Rates of severe maternal morbidity (SMM), which include life-threatening outcomes, are also on the rise with recent estimates revealing that more than 60,000 women a year experience severe maternal morbidity.⁷



result of disparities are driven by insufficient access to nutritious food which leads to adverse outcomes for both maternal and infant health, including low birth weight, preterm birth, and developmental issues.

And, the maternal health problem is disproportionately falling to Medicaid as compared to privately insured women, pregnant women covered by Medicaid have higher rates of severe maternal morbidity and mortality and are more likely to have certain pregnancy risk factors, such as obesity and a history of smoking.

Racial, economic and geographical disparities are observed across all of the data. A primary

Food insecurity, a result of these disparities, also remains prevalent in the United States, with Medicaid beneficiaries experiencing higher rates of food insecurity compared to the general population. This disparity is even more pronounced among pregnant women and new mothers. Maternal health complications, such as hypertensive disorders, hemorrhage, and infections, remain the leading causes of maternal mortality and morbidity worldwide.

⁴ Data: Centers for Disease Control and Prevention, “Severe Maternal Morbidity in the United States,” last updated Feb. 2, 2021; Roosa Tikkanen et al., Maternal Mortality and Maternity Care in the United States Compared to 10 Other Developed Countries
⁵ Chairman Don Beyer, JEC (Joint Economic Committee Democrats), Improving Maternal Health Care Would Save Lives and Prevent Economic Losses, Especially for Women of Color https://www.jec.senate.gov/public/_cache/files/e8830e55-b345-455b-a5fa-5c16ddb7353c/maternal-mortality-final-1-.pdf

⁶ So O’Neil et al., The High Costs of Maternal Morbidity Show Why We Need Greater Investment in Maternal Health (Commonwealth Fund, Nov. 2021). <https://doi.org/10.26099/nz8s-4708>

⁷ Data: Centers for Disease Control and Prevention, “Severe Maternal Morbidity in the United States,” last updated Feb. 2, 2021; Roosa Tikkanen et al., Maternal Mortality and Maternity Care in the United States Compared to 10 Other Developed Countries (Commonwealth Fund, Nov. 2020); Jiajia Chen et al., “Assessment of Incidence and Factors Associated with Severe Maternal Morbidity After Delivery Discharge Among Women in the US,” JAMA Network Open 4, no. 2 (Feb. 2, 2021): e2036148.

IMPORTANCE OF INTEGRATED FOOD, NUTRITION, AND COACHING INTERVENTIONS FOR MATERNAL HEALTH



Personalized Food Access

For expectant and new mothers in the Medicaid population, access to personalized food options is crucial to support their unique nutritional needs. Pregnancy and the postpartum period require specific nutrient intake to ensure the healthy development of the baby and to support the mother's recovery. However, food deserts and food swamps, prevalent in many underserved areas, limit the availability of fresh and healthy food options, making it challenging for pregnant and new mothers to access the necessary nutrients.

Personalized food access can be achieved through innovative solutions like direct-to-home shipped delivery services. By tailoring food selections to meet the individual dietary requirements and cultural preferences of expectant and new mothers, this approach ensures they receive the essential nutrients needed for a healthy pregnancy and postpartum recovery. Offering nutritious food choices that align with their specific needs empowers these women to make informed decisions about their diets, positively impacting their maternal health and the health of their infants.



Health and Nutrition Coaching

Health coaching plays a crucial role in supporting expectant and new mothers in making healthy dietary choices during pregnancy and the postpartum period. Health coaches possess the expertise to provide personalized guidance and dietary plans that address the unique nutritional requirements of pregnant and new mothers.

Health coaching has shown promise in improving maternal health outcomes. Studies have indicated that health coaching can positively influence dietary behaviors, leading to better adherence to dietary plans and improved health outcomes for pregnant and postpartum women.

During pregnancy, women may face challenges related to morning sickness, food aversions, and cravings. Health coaches can offer strategies to manage these issues while ensuring adequate nutrient intake. Additionally, health coaches can educate women about the importance of specific nutrients such as folic acid, iron, calcium, and omega-3 fatty acids, which are essential for fetal development and maternal health.

Health coaches play a vital role in providing personalized guidance and support to expectant and new mothers. They can address the unique nutritional needs of pregnant and postpartum women, offer strategies to manage pregnancy-related challenges, and educate women about the importance of proper nutrition during these critical periods.



Postpartum nutrition is equally vital for the mother's recovery and breastfeeding success. Health coaches can provide support and guidance to new mothers to help them maintain a balanced diet while adapting to the demands of caring for a newborn.

Cultural Sensitivity in Maternal Nutrition

Cultural relevance is a critical aspect of promoting healthy food choices for expectant and new mothers in the Medicaid population. Different cultural backgrounds and traditions influence dietary preferences and practices. By acknowledging and respecting cultural diversity, health coaching and personalized food access can cater to the unique needs and preferences of each individual, promoting better adherence to dietary plans.

Benefits of a Holistic Approach

The correlation between nutrition and maternal health outcomes is well-established. Proper nutrition during pregnancy and the postpartum period is crucial for the health of both the mother and the developing child.

Gaining access to nourishing groceries during pregnancy and postpartum offers significant benefits for expectant and new moms. Adequate nourishment plays a pivotal role in bolstering maternal well-being and facilitating the optimal growth of the baby. Ensuring that pregnant women and new mothers can access nutrient dense foods ensures they have the resources to nurture both themselves and their growing families, thereby promoting optimal health outcomes for both mother and infant.

BENEFITS



FACILITATE FETAL DEVELOPMENT:

Nutrient-laden foods offer vital vitamins, minerals, and elements essential for fetal development



WEIGHT MANAGEMENT:

Maintaining proper nutrition during pregnancy and the postpartum period aids in achieving healthy weight gain



MITIGATE BIRTH COMPLICATIONS:

A well-rounded diet can diminish the likelihood of birth-related complications



REDUCE POSTPARTUM DEPRESSION RISK:

Certain nutrients such as omega-3 fatty acids are linked to brain health and mood stabilization



BOOST MATERNAL WELLNESS:

Adequate nutrition bolsters the health of the mother throughout her pregnancy and the postpartum period



PROMOTE BONE HEALTH: Adequate

intake of calcium and vitamin D sustains bone health for both the mother and the developing baby



SUPPORT BREASTFEEDING: The nutritional content of breast milk is closely tied to maternal dietary intake

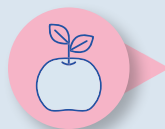


CULTIVATE HEALTHY EATING PATTERNS:

Access to nutrient-dense groceries during pregnancy and postpartum assists in fostering healthy eating habits



POSTPARTUM HEALING: Nutrient-dense foods expedite the recovery process after childbirth by furnishing the body with essential resources



LONG-LASTING HEALTH AND

WELLNESS BENEFITS: Proper nutrition during pregnancy and the postpartum period

Read the Empowering Medicaid Populations: The Transformative Role of Personalized Food Access and Nutrition Coaching white paper for more details on general benefits and definitions of food swamps and food deserts.

CONCLUSION



Maternal health is a critical aspect of overall healthcare, and ensuring access to quality nutrition is essential for the well-being of expectant and new mothers.

Empowering the Medicaid population, particularly expectant and new mothers, through personalized food access and health coaching is essential for improving maternal health outcomes. By addressing food insecurity and providing culturally sensitive nutrition support, we can positively impact the health of mothers and infants. This holistic approach acknowledges the importance of personalized care, dignity, and empowerment. It ultimately contributes to a healthier and more equitable future for mothers and infants in the Medicaid population.





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