



# MCH 2020: Women & Maternal Health

## State Priority

Women (ages 18-44 years) have access to and receive coordinated, comprehensive services before, during and after pregnancy

## Performance Measures

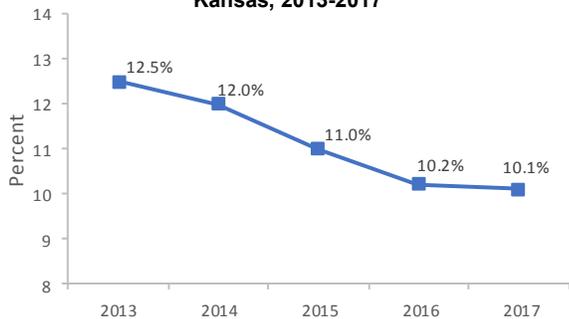
- Percent of women with a past year preventive medical visit
- Percent of women served by a Title V program that received education on the importance of a preventive medical visit in the past year
- Percent of preterm births (<37 weeks gestation)
- Percent of women who smoke during pregnancy

## Kansas Data Highlights

- In 2016, 61.0% of women (18-44 years) had a preventive medical visit.<sup>1</sup>
- In 2017, the preterm birth rate (9.6%) was higher than the March Dimes goal of 8.1% by 2020.<sup>2</sup>
- Mothers who smoked anytime during pregnancy were almost two times more likely to have a baby die than mothers who did not smoke. In 2017, 10.1% (3,680 out of 36,374) of mothers reported smoking during pregnancy.<sup>2</sup>
- Opportunity for Improvement: Disparities persist in women/maternal health based on racial, ethnic, socioeconomic and geographic factors.

## Spotlight on Improvement

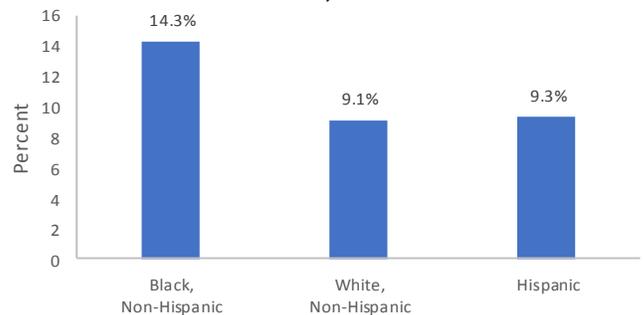
Women Reporting Smoking During Pregnancy  
Kansas, 2013-2017



Source: KDHE Bureau of Epidemiology and Public Health Informatics

## Example of Health Disparity

Preterm Birth (<37 Weeks Gestation) by Race/Ethnicity  
Kansas, 2017



Source: KDHE Bureau of Epidemiology and Public Health Informatics

## Next Steps

- Increase the number of women receiving a preventive medical visit (well-woman visit) and developing a reproductive life plan annually.
- Implement a statewide training program for hospitals to increase knowledge and improve quality of care for infants exposed to substances during pregnancy.
- Increase the percent of women covered by Medicaid with a prior preterm birth who receive progesterone.
- Increase the number of established perinatal community collaboratives (prenatal education + care). The Kansas Model utilizes the March of Dimes Becoming a Mom<sup>®</sup> prenatal education curriculum and public-private partnerships.



This fact sheet, created by the Kansas Department of Health & Environment Bureaus of Epidemiology and Public Health Informatics and Family Health, highlights the priorities and measures identified as part of the Title V MCH Services Block Grant Program five year needs assessment (MCH 2020). The Title V Block Grant was authorized in 1935 as part of the Social Security Act. Title V's mission is to improve the health and well-being of the nation's mothers, infants, children and youth, including children and youth with special health care needs and their families.

