

Executive Summary

Kansas, home to nearly three million residents, has over a third living in rural areas where limited healthcare resources impact maternal and child health. The lack of Medicaid expansion, workforce shortages, income inequality, and disparities in education, employment, and food security further contribute to poor health outcomes. Nearly half of Kansas counties lack obstetric services, creating maternity care deserts.

The Maternal and Child Health (MCH) Needs Assessment identifies strengths and challenges within the MCH population, guiding efforts to advance health equity and improve outcomes. It integrates quantitative data from national measures and service data systems like DAISEY, alongside qualitative insights from focus groups, interviews, and community engagement. The assessment examines key issues such as health disparities, access to care, system coordination, behavioral health, and social determinants of health.

The Kansas Title V MCH Program serves a diverse population, providing 135,437 visits to almost 60,000 women and children from 2020 to 2024. Among those served, 64% of children and 70% of adults live below the poverty line. The program delivers essential services, including prenatal care, mental health support, early childhood screenings, and parenting education, to meet the needs of underserved families.

Key Themes and Focus Areas

The assessment identifies six primary areas affecting MCH outcomes:



Health disparities and equity remain a significant concern, particularly for minority populations, rural residents, and low-income individuals who experience worse maternal and infant health outcomes and barriers to care.



Mental health and substance use disorders are growing concerns, with rising adolescent suicide rates, increasing substance use disorders, and high rates of perinatal mood disorders among mothers.



Access to care is hindered by rural workforce shortages, a lack of obstetric, pediatric, and mental health providers, and Medicaid coverage gaps.



Violence and injury prevention efforts are needed as rates of bullying, intimate partner violence, firearm deaths, and child homicides have increased, particularly among certain racial and socioeconomic groups.



Care coordination and system navigation challenges create barriers for families seeking services, particularly for children with special health care needs, due to a fragmented healthcare system.



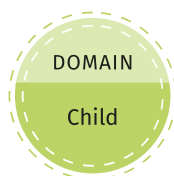
Social determinants of health, such as economic barriers, food insecurity, and housing instability, significantly impact maternal and child health outcomes, requiring systemic policy interventions.

Domain-Specific Findings and Recommendations



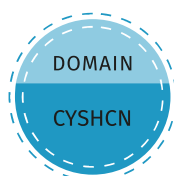
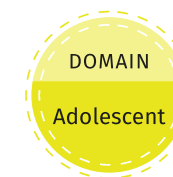
Women and maternal health has seen some improvements. Prenatal care rates (77%) and postpartum visit rates (92%) exceed national averages, and smoking during pregnancy has declined. However, maternal mortality remains high at 22.8 per 100,000, with persistent racial disparities. Violence against women and economic barriers negatively impact health and well-being. Recommendations include expanding prenatal and postpartum care, addressing maternal mortality disparities, enhancing mental health and substance use disorder treatment, and strengthening workforce recruitment in rural areas.

Infant and perinatal health shows strengths such as high breastfeeding rates and comprehensive newborn screening programs. Challenges include a high preterm birth rate of 11% and an infant mortality rate for Black infants of 10.5 per 1,000 live births. Sleep-related deaths remain a concern, and disparities persist. Recommendations include expanding breastfeeding and safe sleep initiatives, improving access to Level III neonatal intensive care units, and strengthening early intervention services.



Child health outcomes are mixed. While high insurance coverage (95%) and reduced household smoking exposure show progress, challenges remain. Over one in four children face food insecurity, physical activity levels are low, and Medicaid disruptions have led to significant coverage losses. Key recommendations include addressing food insecurity, promoting physical activity, improving pediatric care access, ensuring continuous health coverage, and enhancing violence prevention programs.

Adolescent health presents ongoing challenges. Preventive healthcare visits are increasing, and HPV vaccination rates are nearing national averages. However, adolescent suicide rates remain high at 18.7 per 100,000, and firearm deaths among youth at 13.7 per 100,000 exceed national benchmarks. Substance use disorders among adolescents are also a growing concern. Recommendations include expanding behavioral health services, suicide prevention programs, comprehensive sexual health education, and firearm safety education.



Children and youth with special health care needs have high rates of preventive care (92%), but access to medical homes is declining, and developmental follow-up services are inadequate. Only 78% of children with special health care needs are reported to be in good or excellent health. Recommendations focus on expanding care coordination, strengthening access to medical homes, and enhancing developmental screenings and evaluations.

System-Level Recommendations

Advance health equity

Implement targeted interventions for racial and socioeconomic groups experiencing the greatest barriers. Expanding culturally and linguistically appropriate services and increasing funding for community-based organizations will be essential.

Improve access to care

Invest in workforce development strategies, improving health care coverage, strengthening telehealth services, and improving referral systems that connect MCH populations to services they need.

Enhance care coordination

Integrate community health workers, doulas, and peer support staff into healthcare teams to help families navigate complex health systems.

Expand behavioral health services

Focus on maternal and adolescent mental health, suicide prevention efforts, and substance use disorder services.

Address social determinants of health

Expand programs that combat food insecurity, housing instability, and economic barriers that affect maternal and child well-being.

Strengthen health care systems

Promote multi-sector dialogue and collaboration to ensure preventive, primary, diagnostic and acute care services (including telehealth) are available to all MCH populations, regardless of where they live in the state.

Bolster preventive health efforts

Increase vaccination rates, expanding developmental screenings, and promoting early intervention services for children.

Utilize data to drive change

Enhance the use of integrated data systems like DAISEY to track progress on health outcomes, identify gaps in care, and inform program decisions.

Conclusion

The MCH Needs Assessment provides a comprehensive roadmap for improving maternal and child health outcomes in Kansas. By addressing health disparities, workforce shortages, behavioral health challenges, and social determinants of health, the Title V MCH Program aims to create a more equitable and effective system of care. Expanded access to healthcare services, enhanced care coordination, and data-driven programmatic efforts will help improve the overall well-being of women, infants, children, and adolescents across the state.