

HHS ACIMM

IMPROVING
INDIGENOUS BIRTH
OUTCOMES

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AI/AN POPULATION & DEMOGRAPHICS

2020 US Census – fast growing & young population

Location: About 60% live on/near reservation homelands/rural; AIANc trending urban

Median age: 26 (37 yrs nationally)

31% < 18 years (24% nationally)

AI/AN INFANT MORTALITY

- As compared to non-Hispanic white population:
- AI/ANs experience twice the infant mortality rate
- AI/AN infants are 50% more likely to die from complications due to birth weight
- AI/AN mothers 3x more likely to receive late or no prenatal care

Characteristics of AI/AN Mothers

Only 64% receive pre-natal care

13% receive late or no pre-natal care

~ 15% smoked during pregnancy

Women ages 20-24 years have highest rate of infant mortality

2.5 times pregnancy-related deaths as white women (32.5 AI/AN | 13 white)

TOP 5 CAUSES OF AI/AN INFANT MORTALITY

1. Low-Birthweight
2. Congenital malformations
3. Maternal complications
4. Sudden Infant Death Syndrome (SIDS)
5. Accidents (unintentional injuries)

SUMMARY OF ISSUES

- Improve **AI/AN infant wellness** by achieving **maternal health equity**
- Native people receive less health care than White people.
- As a country, we have the worst maternity mortality outcomes of any developed nation, but **particularly worse** for **Native and Black mothers**.
- **Maternity health care deserts**, especially in rural areas
- AI/AN women may feel **vulnerable in clinical environment** or home visit/care.

SUMMARY OF STRATEGY

Reform efforts should include:

- Training more Native health care professionals,
- Making investments in rural health/IHS facilities,
- Funding parent-mentors to support pre- and post-natal care (visiting nurses and parenting supports)
- Addressing community factors (housing, food & nutrition), and
- Ensuring cultural competency of clinic and hospital staff

ISSUES & STRATEGIES

Area of Concern	Issues	Strategies
Community	Access to clinical care Unstable housing No transportation Obesity & chronic illness	Increase providers and locations, access to Medicaid Prioritize pregnant & postpartum for temporary housing Vouchers and drivers Improve diets—access to healthy foods & nutrition education
Health Care	Ob-Gyn services: Maternity Deserts Inconsistent care protocols No continuity of care between mother & infant	Ensure all hospitals, clinics, and staff follow same protocols
Patient/Family	Understanding pregnancy and newborn care Nonadherence to health regime	Ensure all hospitals, clinics, and staff follow same protocols
System	Service segregation Poor case coordination/management Missing cultural competencies Guiding policies & protocols	Ensure all hospitals, clinics, and staff follow same protocols