

Perinatal Health Care in Indian Country: Perceptions and Contrasts

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- for
- DHHS Secretary's Advisory Committee on Infant Mortality
- M. Susan Stemmler, MPH, PhD, CNM



Disclosures

- American College of Nurse Midwives, Liaison to American College of Obstetricians and Gynecologists (2014-2021)
- Indian Health Service contracts facility focused evaluation by the ACOG Committee on American Indian/Alaska Natives Women's Health for evaluation of Women's health services throughout the IHS Areas.

Perinatal Health Matters

- ~ 2.6 million Native Americans
 - 574 federally recognized tribes
- Pregnancy related mortality 2.6, 2.2x > White women
- Infant mortality is 2x > White (OMH, CDC 2020)

Tribal Communities

- All are unique
- Resources are varied
- Affluence vs poverty, education, self-governance-PL93-638
- Rural or Urban setting: 78% AI/AN live in cities,
- Decision-making bodies w/in Tribes have varied priorities

Indian Health System

Rural

- Shortages of providers
- Hybrid forms of recordkeeping
- Inconsistent update of medical procedures
- Inconsistent professional linkages w/ local HC facilities
- Inconsistent community outreach and contact

Urban

- Non-uniformity of services
- Inconsistent community linkages
- 638 FQHC options

Care of Moms takes care of Baby

- Entry into prenatal care
- Perinatal education
- Address maternal health: obesity, diabetes, substance abuse
- Community involvement

Taking Care of Providers

- Professional collaborative care
 - Appropriate use of Midwifery services
- Professional in-service
- Telemedicine
- Contingency planning for status change, early delivery