Section IV: Focused Area Content

Policy Recommendations

While it is urgent that we make team, unit and system level changes to improve care and outcomes for newborns who need resuscitation, it is also important to make upstream policy and structural changes so fewer newborns are born needing to be resuscitated and health care systems and clinicians have the support they need to provide the best care. The biggest policy changes that can be made to reduce the need for resuscitation are those that would reduce the rate of preterm birth. The following population-based and hospital-level policy changes are needed to improve the health of our babies and communities.

Policy changes to reduce the rate of preterm birth:

- Ensure access to contraception to reduce teen and unintended pregnancies and to support healthy pregnancy spacing
- Increase access to prenatal care through:
    - Medicaid expansion
- Decrease prenatal use of tobacco, cannabis, alcohol, opioids, methamphetamine, and cocaine through:
    - Public education campaigns
    - Access to free quit resources for tobacco and cannabis
    - Access to wraparound, integrated physical and behavioral health care for perinatal substance use disorders
- Increase access to midwife-led care and freestanding birth centers by:
    - Providing equitable insurance coverage for midwives and freestanding birth centers

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