



Severe Hypertension in Pregnancy and Postpartum **Policy Recommendations**

Oregon Perinatal Collaborative



Acknowledgments:

The Oregon Perinatal Collaborative (OPC) gratefully acknowledges the volunteer multidisciplinary members, representing clinical and non-clinical expertise, of the Hypertension Bundle Workgroup who helped develop and review the content of the toolkit, as well as plan for implementation.

We are also grateful for the members of the Hypertension Focus Group that included Black, Indigenous, and Pacific Islander people who experienced pregnancy related severe hypertension or preeclampsia in Oregon and shared their experiences to help inform the toolkit elements, including specific recommendations.

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Inclusive language notice:

This toolkit is intended to improve care and outcomes for pregnant and postpartum people who have a wide range of gender identities. For this reason, we use both gendered and non-gendered terms including “birthing person/people,” “patient,” “mother,” and “maternal,” to reflect this range of identities. We affirm that respecting individual patient preferences regarding gendered language throughout their care is essential to respectful, patient-centered care.

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Recommendations for Policy Change

While it is urgent that we improve care and outcomes for people who develop severe hypertension or preeclampsia during pregnancy or postpartum, it is also important that we make upstream policy and structural changes so that people enter pregnancy in greater health and fewer people develop these complications. The following population-based policy changes are needed to improve the health of our communities and to reduce hypertension, not just in pregnancy but over the whole life cycle.

Policy changes to reduce hypertension and/ or morbidity from hypertension:

- Policies that reduce structural racism and address social determinants of health
 - [Healthy People 2030 Social Determinants of Health](#)
- Policies that increase physical activity and healthy eating
 - Community design (city planning) to increase physical activity
 - Creation of activity-friendly routes to common destinations
 - Policies that increase access to healthy food and drink such as decreased sodium in packaged foods and school meals
- Policies that decrease the use of tobacco
- Universal insurance coverage of home blood pressure monitors for pregnant and postpartum people

[Surgeon General's Call to Action to Control Hypertension](#)

In addition to these population-based policy changes, people with lived experience of severe hypertension and preeclampsia have identified health system, state, and federal policy changes that could improve health, access to care, and quality of care. The following policy recommendations are from the OPC Black, Indigenous, and Pacific Islander Severe Hypertension focus group.

Policy changes recommended by OPC Black, Indigenous, and Pacific Islander Severe Hypertension focus group:

- Increase access to culturally matched providers through policies that support Black, Indigenous, and people of color to become physicians and midwives.
- Provide access to continuity of care with midwives and/or doulas.



- Structure provider schedules so that there is time for unhurried discussion of patient questions and fears.
 - This could be accomplished through changing reimbursement models to prioritize visit lengths that support education and discussion.
- Improve access to therapy and peer support groups for patients with severe hypertension, preeclampsia and other pregnancy related complications.
- Provide comprehensive reproductive health education in school, in communities, and online.
- Increase the length of protected maternity leave.
- Provide free access to high quality physical and mental health care for people with limited resources.

Zhou, B., Perel, P., Mensah, G. A., & Ezzati, M. (2021). Global epidemiology, health burden and effective interventions for elevated blood pressure and hypertension. *Nature Reviews Cardiology*, 18(11), 785-802.

Colvin, C. L., Kalejaiye, A., Ogedegbe, G., & Commodore-Mensah, Y. (2022). Advancing equity in blood pressure control: a response to the Surgeon General's Call-to-Action. *American Journal of Hypertension*, 35(3), 217-224.

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