

MATERNITY ACTION PLAN OVERVIEW:

IMPROVE COMMUNITY-BASED SOCIAL SUPPORTS

Additional supports outside the medical system are needed as part of a multi-sector approach to address social determinants of health and reduce maternal and infant mortality in New Jersey. Healthy food, a safe living environment, affordable childcare, quality education, and viable employment with a livable wage contribute to better health yet are often unaddressed in health care policy initiatives. This requires public investments and partnerships to solve immediate problems and build collaborative systems for long-term change.



COMMUNITY-BASED SOCIAL SUPPORTS RECOMMENDATION 1

Make a safe, secure place to live available to all New Jersey families.



Lack of affordable housing during pregnancy can lead to poor maternal health, low birth weight and pre-term birth. New Jersey policymakers can dedicate a portion of state funds in each budget year to increase affordable housing units in New Jersey for pregnant people and families with young children.

Strategies to increase the amount of affordable housing in New Jersey for pregnant people and families with young children should include additional funds to the State Rental Assistance Program (SRAP) to pilot project-based housing, which may include collaborations with the Department of Children and Families (DCF). Priority consideration should be given to housing services that have integrated behavioral support for mental health needs and substance use treatment so families can live together while receiving care.

State and federal funds, as well as support from private corporations, nonprofits, and municipalities, will be needed to support infrastructure development to build more affordable, safe housing units. Collaboration with community-based organizations will support the integration of wraparound services centralized in affordable housing centers.

COMMUNITY-BASED SOCIAL SUPPORTS RECOMMENDATION 2

Maximize financial support to families for high-quality childcare.

Increasing awareness and use of childcare tax credits, paid family leave, Earned Income Tax Credits (EITC), and childcare subsidies to support financial security will help ensure access to high-quality, affordable childcare.¹

Financial support for childcare, as well as paid family leave programs, aid in the healthy development of children by reducing poverty and enabling the continued involvement in the workforce that promotes economic security.



New Jersey in recent years has made significant advancements to paid family leave programs, invested in making childcare programs more available to families that struggle to get by, and broadened eligibility for the EITC. The impact of New Jersey's changes to the state EITC and financial assistance for childcare should be studied because the findings will likely inform future policy decisions on social investments to improve health and wellbeing.

To support greater access to childcare, the state should consider maintaining pandemic-linked childcare affordability allowances that made high-quality childcare accessible for families and make permanent childcare subsidies based on enrollment, not attendance. Outreach and public awareness need to be a key component of strategies to ensure New Jerseyans know about and use childcare services and supports that are affordable and high quality.



Title V funding is one of the largest federal block grants awarded to states. It supports promoting and improving maternal and child health (MCH) and well-being.² Title V funds are used to support many essential MCH programs in the state, including the Maternal Mortality Review Committee, Fetal Infant Mortality Review, Healthy Women, Healthy Families initiatives, and Maternal Infant Early Childhood Home Visiting (MIECHV) evidence-based home visitation programs.

COMMUNITY-BASED SOCIAL SUPPORTS RECOMMENDATION 3

Enhance and build awareness of Connecting NJ to support Title V Block Grant and other community programs.

Connecting NJ, a network of partners and agencies (formally Central Intake hubs) are a single point of entry for screening and referral of birthing people and their families to many of the services and supports funded by the Title V block grant. Currently, the path for families to access services is either referrals on the Perinatal Risk Assessment (PRA) form or by self-referral to Connecting NJ. This process of getting people the services they need for a healthier perinatal experience could be improved by ensuring that the screenings are done in a manner that ensures that the patient knows they are being referred and why the program may benefit them. In addition, the referring entity (Managed Care Organization or Provider) and the service provider should communicate and close the loop on whether the patient was reached, any services provided or any outstanding issues.

¹ At the time of report release, a package of childcare-related bills had been introduced in the NJ State Senate and were pending legislative review.

² US Department of Health and Human Services: Title V Block Grant. <https://www.hhs.gov/guidance/document/title-v-maternal-and-child-health-services-block-grant-states-program-guidance-and-forms-2#:~:text=As%20one%20of%20the%20largest,special%20needs%2C%20and%20their%20families.>