

U.S. Department of Health and Human Services

Task Force on Research Specific to Pregnant and Lactating Women

Agency Activities: Health Resources and Services Administration (HRSA)

Research

HRSA is not primarily a research agency; HRSA's mission involves improving health care to people who are geographically isolated, economically or medically vulnerable. HRSA also supports the training of health professionals, the distribution of providers to areas where they are needed most, and improvements in health care delivery (<https://www.hrsa.gov/about/index.html>). However, HRSA does support some research on topics related to the health of pregnant and lactating women. Most of HRSA's research efforts are supported out of the Maternal and Child Health Bureau. These grants typically do not address safety and effectiveness of medication for pregnant women directly. Instead, these projects are primarily focused on health care utilization, impact of HRSA's programs, and dissemination of evidence-based practices in the community. Between 30 and 50 such HRSA-supported research projects related to pregnancy and/or lactation have been active in each of the previous 5 years. Examples of HRSA-funded research projects include:

- Researchers supported by HRSA are examining the impact of the mandate to provide lactation support services under the Affordable Care Act, and assessing this mandate's effects on breastfeeding behaviors.
- Another HRSA-supported study was designed to examine the efficacy of an exercise intervention to prevent perinatal depression among women attending federally qualified health centers serving high risk women. Possible effects on gestational weight gain and retention will also be explored.
- HRSA-supported scientists are conducting a pilot randomized controlled trial to generate data on the impact of tele-lactation services via video calls on personal electronic devices. Data on breastfeeding duration and exclusivity, as well as perceptions and satisfaction with breastfeeding, will be captured via surveys and in-depth interviews and compared across groups.
- A recently-completed HRSA project was designed to adapt and test an evidence-based intervention for pregnant women with PTSD (and sub-threshold PTSD symptoms) served by the HRSA-funded Healthy Start program.

HRSA supports the MCH Research Network on Pregnancy Related Care (also known as the CARN network), a group of practicing obstetrician-gynecologists affiliated with the American College of Obstetricians and Gynecologists (ACOG). The CARN network conducts multi-site research on critical issues affecting pregnancy-related care and maternal health across the lifespan, and administers survey studies to inform clinical practice. Recent findings from the CARN network include:

- Researchers found variation in practice patterns of obstetricians related to screening for group B streptococcal colonization and providing preventive antibiotics before or during labor.
- CARN researchers studied patient and provider reports about recommendations for, and receipt of, flu vaccine among pregnant women. They found substantial discrepancies between self-reports of medical providers and patients and medical records; for example, nearly 80% of patients self-reported accepting the influenza vaccine, but medical record data indicated only 36% of patients accepting the vaccine. Similarly, all medical providers reported giving

recommendations for the vaccine, but only 85% of patients reported receiving a recommendation.

- Researchers investigated physician practice patterns for pregnant patients around the influenza vaccine during the 2009-2010 H1N1 flu seasons. The data showed that a higher proportion of women eligible for Medicaid in a practice was associated with a lower estimate of vaccination rate. Ob-gyns with more than 20 years of practice were more likely to be concerned about the risks of antivirals and less likely to routinely prescribe them. An earlier CARN survey had also demonstrated that some barriers existed to vaccination within ob-gyn practices.
- A survey conducted by CARN indicated that many ob-gyns are not utilizing the recommended validated resources such as the DSM-IV or PHQ-2 for diagnosis of depression or prior to prescribing antidepressants.

HRSA has also recently funded a Home Visiting Research network to facilitate research and research-based practice in home visiting programs (<http://www.hvrn.org/index.html>).

Clinical Care

HRSA's **Health Center Program** is a national network of health centers that provide comprehensive primary health care services to more than 24 million people nationwide, regardless of a patients' ability to pay, charging for services on a sliding fee scale. About 1 in 13 people relies on a HRSA-funded center for primary care (<https://www.hrsa.gov/about/organization/bureaus/bphc/index.html>). In addition, more than half of pregnant women and more than a third of infants and children benefit from HRSA's **Title V Maternal and Child Health Block Grant** program. The MCH Block Grant contains three major funding categories: (1) MCH Formula Grants to States are awarded to State health agencies based on the number of children in poverty in a state, and represent the largest funding component of Title V (roughly 85 percent); (2) Special Projects of Regional and National Significance (SPRANS) grants; and (3) Community Integrated Service Systems (CISS) grants. Both SPRANS and CISS grants are awarded on a competitive basis and support such activities as research, training, and systems building to improve access and equity in health care (<https://www.hrsa.gov/about/pdf/mchb.pdf>).

HRSA's **Healthy Start** program provides grants in geographic areas with high infant mortality. In these areas, pregnant women who enroll in Healthy Start receive health care services, but also may receive (as needed) case management, outreach, home visiting, adolescent pregnancy prevention, childbirth education, parenting skill-building, self-esteem building, transportation, translation, child care, breastfeeding and nutrition education, father support, housing assistance, job training, and prison/jail-based services (<https://mchb.hrsa.gov/maternal-child-health-initiatives/healthy-start>). The **Maternal, Infant, and Early Childhood Home Visiting Program** gives pregnant women and families, particularly those considered at-risk, necessary resources and skills to raise children who are physically, socially, and emotionally healthy and ready to learn (<https://mchb.hrsa.gov/maternal-child-health-initiatives/home-visiting-overview>). The **Ryan White HIV/AIDS program** provides primary medical care and essential support services for people living with HIV who are uninsured or underinsured. Part D of the Ryan White program is designated specially for women, infants, children and youth living with HIV (<https://hab.hrsa.gov/about-ryan-white-hiv-aids-program/about-ryan-white-hiv-aids-program>).

The **Healthy Tomorrows Partnership for Children** program, through several projects across the country, supports services for pregnant and lactating women and their children (https://www.grants.gov/view-opportunity.html?oppld=284005&utm_campaign=enews06022016&utm_medium=email&utm_source=govdelivery). Examples of program activities include:

- The Medical Care Management for Complex Prenatal Patients project provides coordinated medical care management to complex and high risk prenatal patients to improve care coordination and address poor perinatal health outcomes in south Los Angeles.
- The Healthy Tomorrows Hawaii program works to make prenatal and pediatric care more culturally appropriate and accessible.
- The Maternal and Child Health Coordination Project in Chicago provides services to new mothers and babies in low-income, medically underserved neighborhoods. The program encourages breastfeeding, postpartum follow-up, and preventive screenings.
- The ReadNPlay for a Bright Future program in Tennessee provides lactation education and support for mothers of infants.

Through its **training programs**, HRSA provides some guidance and/or information related to the care of pregnant and/or lactating women. For example:

- the Leadership Education in Adolescent Health (LEAH) training program may provide training related to the care of pregnant or lactating teens.
- The Maternal and Child Health Nutrition Training program (<https://mchb.hrsa.gov/training/projects.asp?program=12>) may also include information related to nutrition in pregnancy.
- Centers of Excellence in Maternal and Child Health Education, Science, and Practice prepares students for careers in maternal and child health fields. Several centers within this program offer education related directly to pregnancy and/or lactation. For example:
 - The University of Minnesota’s program offers continuing education materials on breastfeeding;
 - The University of North Carolina’s program established accredited training for lactation consultants;
 - The University of Washington’s program serves as a regional resource on a variety of maternal and child health issues, including breastfeeding.

Communications

In addition to the activities noted above, HRSA is a federal partner in Text4Baby, a text messaging application free to pregnant women and women with infants to inform them of a variety of pregnancy- and lactation-related health issues.

HRSA’s websites provide resources to pregnant and lactating women and their health care providers. HRSA seeks to inform a wide range of audiences about medication use and safety among pregnant and lactating women (<https://mchb.hrsa.gov/maternal-child-health-topics/maternal-and-womens-health>).

Other Collaborative Efforts

In addition to efforts noted above, HRSA participates in the Federal Interagency Forum on Child and Family Statistics, an interagency group designed to improve both the quality and use of data on children and families by investigating questions of data quality, data measurement, and data integration and by coordinating the development and use of statistical data bases among Federal agencies (<http://childstats.gov>).

In 2016, HRSA also collaborated with NIH, other HHS divisions, EPA, and USAID to hold a scientific workshop to identify optimal approaches for treating and caring for the generation of children exposed to ZIKV in the womb.