

## Family Connects International Public Policy Priorities - 2021

### 1. **Racial Equity.**

Racial equity is the leading principle that underpins our public policy efforts. Dismantling the structures, systems and policies that have built and perpetuated racial inequality will be the only way we can truly achieve our vision of a healthy future for every child. Our policy efforts will be designed in ways that directly address systemic racism in the maternal and child health and home visiting fields. We believe the strongest way to reach equity in children's opportunities and outcomes is to build a proactive universal system of care that reaches every family in a community to understand their family's particular needs and to connect them with community resources to address those needs.

### 2. **Social Determinants of Health.**

We recognize the importance of social determinants of health and adverse childhood experiences in the overall health and well-being of individuals. We also recognize the role that a universal newborn nurse home visiting program can play in conducting a comprehensive, trauma-informed screening for families in the immediate postpartum period, coupled with the ability to follow-up and to make warm hand-offs to community resources and supports. These partnerships should have the ability to meet payer requirements, and priority should be placed on developing data integration capabilities that support data sharing among the entities that provide the holistic care to families.

Thus, we support policies and state/federal payment structures that incentivize such partnerships, including addressing both data integration and reimbursement/funding opportunities.

### 3. **Innovations to Create Sustainable funding.**

A system of equitable, culturally sensitive, coordinated programs with universal touchpoints for all families from the prenatal period through a child's kindergarten entry are essential components for positive outcomes for children and families. Funding to create this type of system will likely require innovations in both public and private funding streams to generate the resources to bring an equitable system to scale.

Our policy work will include serving as a thought partner with federal, state, and local policymakers and other stakeholders in the creation and expansion of innovations such as postpartum/pregnancy payment bundles, commercial insurance reimbursement for home visits, managed care contracting and other mechanisms.

#### 4. **Postpartum health.**

Because the Family Connects model calls for a nurse visit at three weeks postpartum, it is aligned with The American College of Obstetricians and Gynecologists' [recommendations](#) to support birth mothers during the high-risk period immediately after birth (referred to as the "[fourth trimester](#)"). Our policy work includes providing education to federal, state and local leaders about the risks of the fourth trimester and the role that a universally offered newborn nurse home visiting program can play in mitigating those risks at a population level. Integrating the personal and population approaches to health and health care delivery has the potential to optimize each child's life course trajectory, improve outcomes, and reduce costs.