

SUBJECT: Supporting Prenatal Health Care Initiatives in Family Medicine

SUBMITTED BY: Student Association of the ACOFP on behalf of
Fariya Fatima, OMS-I, Texas College of Osteopathic Medicine
Keri Lanier, OMS-II, Campbell University School of Osteopathic Medicine

REFERRED TO: 2022 American College of Osteopathic Family Physicians (ACOFP)
Congress of Delegates

RESOLUTION NO. 14

- 1 WHEREAS, prenatal care includes health care a woman receives during pregnancy;¹ and
2
- 3 WHEREAS, prenatal care can be used to engage patients and provide risk assessments as well as
4 psychosocial, cultural, and educational support with the ultimate goal of improving pregnancy
5 outcomes;² and
6
- 7 WHEREAS, regular prenatal care throughout pregnancy can catch potential concerns early on and reduce
8 the risk of pregnancy and birth complications;³ and
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- 10 WHEREAS, early prenatal care is vital for improving maternal health outcomes and health behaviors;⁴
11 and
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- 13 WHEREAS, prenatal care contributes to decreasing risk of preterm births⁵; and
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- 15 WHEREAS, spontaneous preterm birth is the leading cause of perinatal morbidity and mortality in the
16 United State with rates of nearly 1 in every 8 infants, significantly higher than other developed
17 countries;⁶ and
18
- 19 WHEREAS, the lack of prenatal care can increase the risk of infant death;¹ and
20
- 21 WHEREAS, women who do not seek prenatal care are 3 times as likely to deliver a low birth weight
22 infant;¹ and
23
- 24 WHEREAS, a greater number of women are experiencing pregnancy and childbirth complications, with a
25 16.4% and 14.2% increase respectively from 2014 to 2018;⁷ and
26
- 27 WHEREAS, rates of maternal morbidity and mortality are rising in the United States, doubling from
28 7.4/100,000 live births in 1986 to 14.5/100,000 in 2018;⁸ and
29
- 30 WHEREAS, there has been an increasing prevalence of pre-existing conditions prior to pregnancy that
31 can further increase pregnancy and childbirth complications;⁷ and
32
- 33 WHEREAS, significant health disparities and barriers result in a decreased level of prenatal care for
34 certain populations including Black, non-Hispanic, and Hispanic women, women younger
35 than 20 years of age, and women without a high school degree;⁴ and

36 WHEREAS, Black, Hispanic, and Native American women are all at risk for late entry into prenatal care
37 with Black women having a significantly higher risk for maternal death;² and
38
39 WHEREAS, family physicians provide care for the whole family and through all stages of life, including
40 essential care for reproductive-age women prior to, during, and after pregnancy;⁹ and
41
42 WHEREAS, approximately 28 million reproductive-age women live in rural communities where over
43 50% of counties do not have an obstetrician/gynecologist;¹⁰ and

44 WHEREAS, 63% of maternity care providers in rural hospitals are family physicians;¹¹ and

45 WHEREAS, prenatal care is an important part of the comprehensive care that characterizes family
46 medicine;¹² and
47
48 WHEREAS, the TENANTS of Osteopathic Medicine, as approved by the American Osteopathic Association
49 (AOA), emphasize the person is a unit of body, mind and spirit, and osteopathic medical education
50 emphasizes the importance of preventive care and early intervention;¹³ now, therefore be it
51
52 RESOLVED, that the American College of Osteopathic Family Physicians (ACOFP) advocates for prenatal
53 care early in pregnancy; and, be it further
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55 RESOLVED, the ACOFP encourage third-party payors to provide enhanced reimbursement for
56 comprehensive prenatal visits; and, be it further
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58 RESOLVED, that the ACOFP encourage family medicine physicians to promote early initiation of prenatal
59 care especially among medically vulnerable and underserved populations; and, be it further
60
61 RESOLVED, that the ACOFP advocate for legislative efforts in support of expanding accessible prenatal
62 health care education and initiatives.

FINAL ACTION: APPROVED as of March 16, 2022

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