

**LADIES ANCIENT ORDER OF HIBERNIANS
COMMITTEE ON POLITICAL EDUCATION
DRAFT POSITION STATEMENT**

Maternal and Child Healthcare

The life and dignity of the human person, foundations of a moral and just society, are the basis for Catholic social teaching rooted in Scripture and documented in scholarly writings throughout the centuries. Catholic tradition teaches that human life is not only sacred and inviolate, but that dignity of the person is protected only to the extent that the needs of the poor and most vulnerable members of society are met.¹

In his 1963 encyclical, *Pacem in Terris* (Peace on Earth), Pope John XXIII cited a list of rights pertaining to not only to the right to life but a worthy standard of living, including “food, clothing, shelter, medical care, rest and finally the necessary social services.”²

Access to comprehensive, quality health services is essential for health promotion and maintenance, disease management and prevention; reduction of preventable disability and premature death, as well as the achievement of health equity for all Americans.³

In his letter to Congress in 2009, Bishop William Murphy, Chair of the U.S. Bishop’s Committee on Domestic Justice and Human Development, stated that health care “reform efforts must begin with the principle that decent health care is not a privilege, but a right and a requirement to protect the life and dignity of every person...*The bishop’s conference believes healthcare reform should be truly universal and it should be genuinely affordable.*”⁴

Safeguarding and improving the health and well-being of women and children are fundamental to not only the foundation of families, communities, societies but to the creation of a healthy world.⁵

Poverty is a significant environmental and social factor impacting both maternal and child health. It affects not only access to healthcare and early intervention services, but also economic, educational and employment opportunities, social support, and the availability of resources to meet daily needs. Poverty also contributes to racial and ethnic disparities in maternal and child health outcomes by impacting the ability to access and pay for quality health care.⁶ Childhood poverty is associated with poor developmental and psychosocial outcomes, as well as financial burdens for children, families, and society.⁷

The *Catechism of the Catholic Church* teaches the social justice principle of *subsidiarity* which states “a community of a higher order should not interfere in the internal life of a community of a lower order, depriving the latter of its functions, but rather should support it in case of need and help to co-ordinate its activity with the rest of society, always with a view to the common good.”⁸

The LAOH National Political Education Committee recognizes the following:

Although the Affordable Care Act has improved healthcare coverage and access for poorer Americans, women, children and minorities, there are millions who remain uninsured. Significant access inequalities remain based on gender, age, sex, race, ethnicity, education, location, and income remain.^{9,10}

- Maternal mortality remains significant in the United States (US). Contributing factors are (1) inadequate investment in women's health; (2) inferior care quality; (3) increasing disparities; and (4) inadequate collection and data monitoring of maternal health issues.¹¹
- Infant mortality rate is an important indicator of a nation's overall health, but the United States (US) ranks poorly compared to other industrialized countries in both prevalence and rate of reduction over time.¹²
- Although there are many causes of infant mortality, preterm birth (PTB), defined as any birth before 37 weeks of gestation, is among the most common.¹³
- Clinicians, educators, the public, policymakers, and business leaders acknowledge the importance of the first few years of a child's life in promoting their healthy physical, emotional, social, and intellectual development. Despite this, many children between the ages of 0 and 5 lack emotional support, intellectual stimulation, or access to resources—due to low income or lack of health care, among other factors—that can impede their ability to develop to their fullest potential.
- The interplay of environmental disasters, material losses and residential segregation adds to the incidence of health disparities.¹⁴
- The well-being of mothers, children, families, communities, and society can be threatened when they are excluded from providing input into interventions and decision-making is retained by higher powers rather than those impacted by the initiatives.

The LAOH National Political Education Committee takes the following position on Maternal-Child Healthcare Issues:

- Providing maternal and child healthcare equitably and without discrimination is a moral and ethical concern that must be addressed by federal, state, and local policies, Catholic social justice policies, and individual actions.
- As an organization that supports all stages of life, the LAOH should actively support the Catholic Church's work with local, state, and federal governments, as well as local community groups to address inequities in healthcare for women and children.
- To prevent maternal and infant mortality, it is essential to provide appropriate healthcare equitably and without racial or ethnic bias to women and children, especially during pre-conception and formative periods. Doing so promotes the healthy physical, emotional, social, and intellectual development necessary for the framework of healthy families, communities, societies and world.
- Researchers, healthcare practitioners, policy makers and women and parents should collaborate on the development of evidence-based policies and practices to improve maternal health and reduce maternal and childhood morbidity and mortality nationally and internationally.
- As an organization and as individual members, LAOH members should understand Catholic social teaching and the principle of subsidiarity to better apply the tenets when designing equitable and non-discriminatory public health policy related to women and children.
- All LAOH members should promote an understanding of and work to break down the antecedents of maternal and child healthcare inequities in their own communities, at local, state, and federal levels - especially those related to poverty, structural and interpersonal racism, and ethnic discrimination.
- LAOH members should donate to charities and community organizations that provide maternal and child healthcare and other necessities of life to those most vulnerable in society and to those negatively impacted by natural and other disasters in the US and abroad.

References

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