



Foreword

This book marks the third in the Practical Playbook series, following *The Practical Playbook: Public Health and Primary Care Together* (2015) and *The Practical Playbook II: Building Multisector Partnerships That Work* (2019). The theme of the first two volumes was not to coalesce and repackage existing research, but to provide a timely core resource for more effective engagement and action for pressing frontline challenges. This third volume applies the same lens to one of our society’s most pressing issues—the health of women and birthing people, infants, and children. While it differs from the previous playbooks by focusing on a specific population, the spirit of what is included is completely aligned: across all three volumes, the need for partnership and collaboration between different sectors, systems change to realize true impact, and continued innovation remain constant themes.

Improving the health of women and birthing people and their infants and children is an increasingly complex and nuanced challenge. The mid-20th-century Norman Rockwell paintings that suggested our health was confined to treatments and procedures in a physician’s office seem almost fictional given the complex web of factors and influences shaping health outcomes now. The nation and the health of women and people who birth are at a unique crossroads. The United States is the eleventh richest nation on Earth, with the highest maternal mortality rate of any industrialized country.¹ And it’s not even close. In 2020, in the United States, nearly 24 women die per 100,000 live births, compared to about nine maternal deaths in France and Canada and seven maternal deaths in the United Kingdom.² There are fewer than five maternal deaths per 100,000 live births in all other industrialized nations.² The rate of maternal mortality in the United States stands as a glaring example of the American healthcare paradox—spending more than any other nation on healthcare but not seeing the expected improvements in outcomes. America continues to search for medical answers to a question that is deliberately and single-mindedly medicalized.

Like the other books in *The Practical Playbook* series, this book was written by contributors who believe and understand that solutions to critical health problems cannot be found solely within clinic walls. Solutions will require communities, healthcare professionals, elected leaders, business leaders, and many

others working together, through a shared understanding and commitment to aligned action, to actively confront and dismantle the complexities and inequities driving poor outcomes.

The refrain that more research is needed must be replaced with more action is needed, more results are needed, and more people surviving and thriving through their birthing experiences must be demanded. The present availability of knowledge and the ability to access it are unprecedented in human history. Additional research and further accumulation of knowledge will continue to fail us until our knowledge is operationalized to make the changes needed to improve outcomes. This book seeks to encourage, catalyze, and spur these necessary actions, and to spread the required thinking to evolve our society to one that prioritizes health and stands strongly against the unacceptable number of infant and maternal deaths that the nation continues to experience.

This third playbook provides the necessary grounding and practical tools and examples to achieve a shared goal of improved health specifically for women, mothers, all birthing people, infants, and children. Each chapter offers insights and the blueprints necessary to drive action that can be implemented in clinics or communities. The “plays” provided in the book are the paths through which we can achieve the necessary improvements in health.

Everyone involved in *The Practical Playbook III* has collectively produced a guide to positive, aligned action for improved maternal and child health. Like the other playbooks, it is not meant to be placed on a shelf or simply read cover to cover. It is meant to be used and applied. The factors and parameters that define the health journey for women and birthing people are not constant throughout the United States. Resources, healthcare access, environmental factors, economic opportunities, and other factors vary significantly from place to place. The sections, chapters, and concrete examples provided can be adapted, implemented, revised, and updated to the specific parameters of your communities and situations and as lessons are gathered. The goal of this book and its eventual success depend on its driving you to act and serving as an effective companion on your journey to achieve the outcomes and improvements you know are so critically needed in your communities and populations.

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