OHIO PN3 COALITION

Maternal Health: Address systemic barriers and build a more inclusive, sustainable early childhood system.

The health and well-being of mothers before, during, and after pregnancy are essential to strong birth outcomes and lifelong child development. Yet in Ohio, too many women, especially Black women and women in low-income communities, face unacceptable disparities in maternal health. These disparities are driven by systemic racism, lack of access to care, gaps in mental health services, and insufficient support for community-based maternal care. Addressing maternal health is foundational to building a healthier future for all children and families in Ohio.

Infants, Toddlers, and families, need Ohio to understand that...

Too Many Moms & Babies are Dying

Ohio's infant mortality rate is 7.1 deaths per 1,000 live births – significantly higher than the national average of 5.6 per 1,000.[1]

Black infants are nearly **twice as likely** as their white peers to be victims of infant mortality.[2]

Home Visiting Makes an Impact

Families who participate in Home Visiting are 60% less likely to experience infant loss.[3]

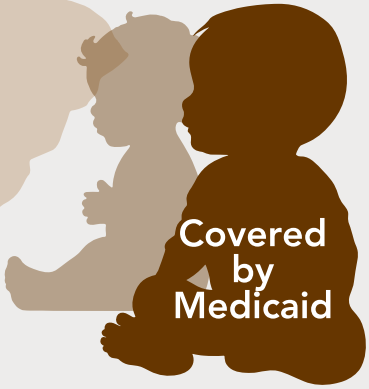
Doulas are Essential

Research[4] consistently shows doula care leads to:

- **22%** reduction in cesarean births
- **39%** decrease in the likelihood of a low birthweight baby
- **15%** increase in spontaneous vaginal birth
- **38%** decrease in risk of postpartum depression
- **Shorter** labor, **higher** maternal satisfaction, and **improved** breastfeeding rates

Medicaid Matters

Over half of all Ohio Babies are born under Medicaid.[5]



"I would not have survived without Home Visiting"

-Parent from East Toledo

Ohio PN-3 Coalition: FY 2026-2027 Budget Priorities

Investing in Our Youngest Children, Supporting Families, and Advancing Equity

As the Ohio General Assembly considers the biennial state budget, the Ohio PN-3 Coalition urges policymakers to restore and expand critical investments for infants, toddlers, and their families. These priorities reflect the needs of children during the most formative years of life, and the urgent call to support the professionals and systems who care for them.

We are asking the Ohio Legislature to reinstate the Governor's proposed funding levels by doing the following:

1. Strengthen Access to Child Care for Families

- Restore publicly funded child care eligibility to 160% of the Federal Poverty Level (FPL) with continued eligibility up to 300% FPL.
- Fully fund the Child Care Choice Voucher Program at $75M in FY26 and $150M in FY27.

2. Expand Economic Security for Families

- Restore the refundable Child Tax Credit of up to $1,000 per child under age 7, available to families earning up to $94,000.

3. Improve Maternal and Infant Health

- Restore $22.5M in Home Visiting investments and $7.5M annually for infant vitality programming.
- Reinstate multi-year continuous Medicaid eligibility for children 0–3 to ensure uninterrupted care during critical years.

4. Expand Access to Doula Services

- Expand Medicaid-covered doula services statewide, not just in six counties, to reach families in urban and high-need areas.

5. Create Safe Environments for Children

- Restore full funding for lead abatement and the Lead-Safe Home Fund.
- Protect H2Ohio investments in water infrastructure that prevent lead exposure in vulnerable communities.

1. Centers for Disease Control and Prevention. (2024) Infant mortality. Maternal Infant Health
2. Centers for Disease Control and Prevention, Wide-ranging Online Data for Epidemiologic Research (WONDER) (2022).
3. Ohio Department of Health. (2023). 2023 Ohio Department of Health annual report.
4. Kozhimannil et al., American Journal of Public Health, 2013
5. The Ohio Department of Medicaid, 2025

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