

# Maternal & Infant Health Assessment

## MIHA



ach year approximately 500,000 women give birth in California. Although most pregnancies are healthy, many women and infants face challenges in reaching optimal health. The Maternal and Infant Health Assessment (MIHA) survey helps to identify and monitor these challenges. MIHA is a population-based survey of women with a recent live birth in California that has been conducted annually since 1999. MIHA collects

self-reported information about maternal and infant experiences and about maternal attitudes and behaviors before, during and shortly after pregnancy. Data from MIHA guide health policies and programs for California women, infants and families. MIHA is a collaboration between California's Maternal, Child and Adolescent Health (MCAH) Division and the Women, Infants and Children (WIC) Division and UC San Francisco's Center on Social Disparities in Health.

**OUR GOAL:** Annually collect and disseminate MIHA data to partners working to address the challenges California women face in achieving optimal health before, during and shortly after pregnancy.

**WE SERVE:** Local health jurisdictions, state agencies, community-based organizations, care providers and others that support public health program planning and policy development.

**OUTCOMES:** Data-informed public health action and improved monitoring of the status of maternal and infant health in California. Stakeholders can use

MIHA data when collaborating with partners across multiple disciplines to help ensure that all California mothers and infants have healthy places in which to live, grow, work and play. MIHA data are presented by statewide maternal subgroups and by county or regional area.

**FUNDING:** The MIHA project is supported by the California Department of Public Health using federal funds from the Title V Maternal and Child Health Block Grant and the Special Supplemental Nutrition Program for Women, Infants and Children.

### WHAT TOPICS ARE INCLUDED IN MIHA?

- ♦ Health status
- ♦ Nutrition and weight
- ♦ Perinatal depression
- Health insurance coverage
- Service utilization and content
- ♦ Breastfeeding
- ♦ Infant sleep
- ♦ Pregnancy intention
- ♦ Family planning
- ♦ Intimate partner violence
- ♦ Substance use
- ♦ Hardships
- Maternal demographics

#### **RESOURCES**

#### www.cdph.ca.gov/MIHA

- Data Snapshots
- Annual Reports
- MIHA Questionnaires
- ♦ MIHA Methods
- Data to Action
- MIHA Publications and Presentations

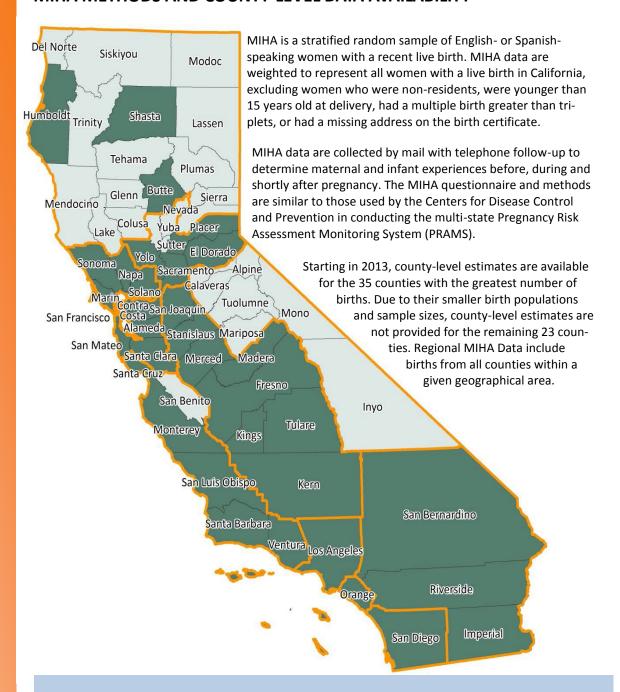
## WE WANT TO HEAR FROM YOU

Please email MIHA@cdph.ca.gov to ask questions about the MIHA survey or to let us know how you use MIHA data.

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#### MIHA METHODS AND COUNTY-LEVEL DATA AVAILABILITY



#### USING MIHA DATA TO IMPROVE MATERNAL AND INFANT HEALTH

MIHA data are used to assess MCAH community needs, set priorities, track progress and make program and policy decisions including targeting limited resources. MIHA identifies critical emerging health issues facing women and children. Related publications and Data Snapshots can be found on the MIHA website (see "Resources" at left).

#### **Highlights of MIHA Data to Action**

 MIHA provides data to meet Title V MCH Block Grant reporting requirements and set priorities to guide State and Local MCAH programs throughout California.

- MIHA staff collaborated with the Centers for Disease Control and Prevention to develop Healthy People 2020 (HP 2020) Objectives, which allow states to compare the well-being of their maternal and infant population to national benchmarks. The CDC continues to use data results from the MIHA survey for HP 2020 reporting.
- MIHA data are used by state and local WIC program directors to inform grant writing activities and customize outreach strategies to address specific barriers to participation in WIC during pregnancy.