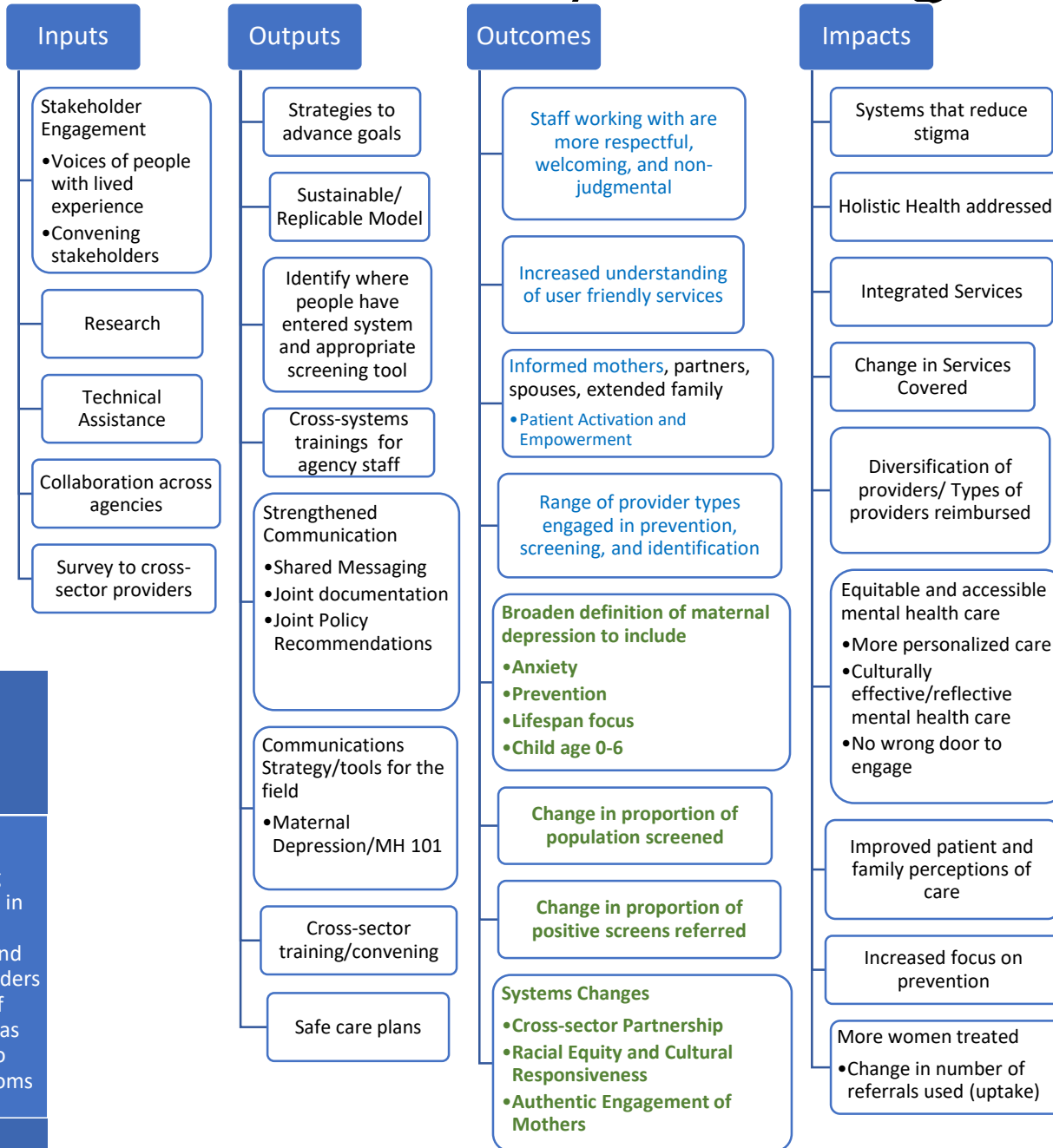


PA MOMD State Theory of Change

Key Context

- A lot of state attention focused on young children and many initiatives that could be an asset
- DHS/DOH "Ready to Start" report focused on ages 0-3 includes a maternal-child health section with maternal mental health components
- Existing multi-sector infrastructure with opioid work and plans of safe care.
- Perinatal Quality Collaborative includes targeted cross-sector stakeholders and developed ground work for MOMD project.
- These initiatives are not well connected; How to keep maternal depression front and center in these initiatives with different focuses
- Legislation introduced related to home visiting, maternal depression, and early intervention.
- Top level priority areas to coordinate with includes, Suicide Prevention Task Force, Parent Pathways initiative, Medicaid and CHIP strategic alignment, statewide resource and referral tool development.
- Opportunity to build on state momentum around infants and toddlers.
- Strong philanthropic opportunities



Assumptions

Embed the work in other efforts in the state on behalf of young children for sustainability

It is important to address all types of barriers that moms experience with a SDOH framework

There is political will around this issue right now with the current administration

There are conflicting perspectives in the state legislature and amongst providers in terms of supporting (as opposed to punishing) moms