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Coverage Better or Worse than Private Insurance?

Maternal and Child Health Training Program Overview

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To mark National Minority Mental Health Awareness Month, the Centers for Disease Control and Prevention shared new resources as part of its Hear Her campaign, which seeks to raise awareness of ...

~~CDC shares new maternal health resources as part of 'Hear Her' campaign; view AHA blog on how listening could save lives~~

Free health care clinic for uninsured or under-insured patients in Bath, Menifee, Montgomery, Morgan, and Rowan counties.

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~~Free health care clinic continues through next Monday~~  
The Biden administration's American Rescue Plan that was passed in March provides no-cost (or very low-cost) health insurance for some taxpayers for the last six months of 2021, and enrollment is now ...

~~Biden stimulus bill provides free health care to millions — but you've got to act fast~~

Residents in the Dover area can get free medical, dental, and eye care next month as part of the Delaware Army National Guard ' s Innovative Readiness Training.

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~~Delaware Nat. Guard to deliver free health care in  
Dover~~

In January, Reason's John Osterhoudt visited Epiphany and spoke with Gross about what free market health care should, and can, look like. Reason: What is primary care at a fundamental level?

~~What Free Market Health Care Would Actually Look Like~~

Becoming a member of Congress has its perks, but a popular social media rumor about their health insurance is false.

~~No, members of Congress do not get free medical care~~

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~~for life~~

DOVER, Del. – Dover City officials are tackling health concerns in their community. They say some residents are struggling to get health care. As a result, the city, the U.S. military, and health care ...

~~Free health care available to Dover residents first week of August~~

A new program is expected to provide free health care to more than 2,500 people in Eastern Kentucky.

~~Community praises new program providing free health care in Eastern KY~~

A group of local stakeholders gathered at a roundtable



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discussion at the Charlotte Center for Legal Advocacy on Wednesday with Xavier Becerra, secretary of the U.S. Department of Health and Human ...

~~HHS Secretary Xavier Becerra visits Charlotte to discuss health care challenges~~

A new report from the Massachusetts COVID-19 Maternal ... health care. Every day GBH News journalists and program hosts come together to deliver timely information and intelligent analysis about what ...

~~Mass. House Coalition Lays Out Path Toward Maternal Health Equity~~

The registration for this purpose is being commenced

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at the selected basic health units. Under the programme, pregnant mothers will be registered in government health centres where free treatment ...

~~Sindh govt launches financial support programme for maternal health~~

He commended President Muhammadu Buhari for operationalising the National Health ... in providing free treatment to the vulnerable group thereby reducing prevailing high maternal and neonatal ...

~~Okowa calls for full operationalization of National Health Act to curb Maternal Mortality~~

French President Emmanuel Macron has ordered all

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French health care workers to get virus vaccines by Sept. 15 and urged all of his compatriots to get vaccinated as soon as possible.

~~France, Greece, Italy mandate COVID-19 vaccine for health care workers~~

“ He just said, ‘ For as long as I ’ m in power, health care is free. ’ ” Lack of enforcement can be a problem in the U.S. too. In the detention centers at the southern border, human-rights ...

~~What It Means for Health Care to Be a Human Right~~

Answer: Yes, you can use money from your HSA tax-free to pay your long-term-care ... Part B leave some

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pretty significant gaps in your health-care coverage. Here's a closer look at what isn't ...

### ~~Using a Health Savings Account to Pay Long-Term-Care Premiums~~

Optum, a leading health services company and part of UnitedHealth Group (NYSE: UNH), has awarded \$1.4 million in maternal health grants and will provide ...

### ~~Optum Awards \$1.4 Million in Maternal Health Grants to Five Community Organizations~~

MainStreet Family Care will host a free community health fair on Saturday, June 26. ARAB, Ala. — MainStreet Family Care will host its first free

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community health fair in Arab on Saturday ...

~~MainStreet Family Care to host free community health fair~~

The order includes calls for banning noncompete agreements and paves the way for hearing aids to be sold over the counter at drugstores.

~~Biden to sign executive order targeting anticompetitive practices in big tech, health care | LIVE~~

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~~Local attorney teams with Shaggy, Flo Rida to salute health care workers with a free concert~~

Chicago Blackhawks captain Jonathan Toews missed the 2020 NHL season due to an illness that some say affects about a quarter of the population, yet isn't commonly discussed and diagnosed. Thought ...

In Nigeria, the government is implementing the Free Maternal and Child Health Care Programme (FMCHCP). The policy is premised on the notion that financial barriers are one of the most important constraints to

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equitable access and use of skilled maternal and child healthcare. In Ebonyi State, Southeastern Nigeria the FMCHCP is experiencing implementation challenges including: inadequate human resource for health, inadequate funding, out of stock syndrome, inadequate infrastructure, and poor staff remuneration.

Furthermore, there is less emphasis on community involvement in the programme implementation. In this policy brief, we recommend policy options that emphasize the implementation of community-based participatory interventions to strengthen the government's FMCHCP as follows: Option 1: Training community women on prenatal care, life-saving skills in case of emergency, reproductive health, care of the

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newborn and family planning. Option 2: Sensitizing the community women towards behavioural change, to understand what quality services that respond to their needs are but also to seek and demand for such. Option 3: Implementation packages that provide technical skills to women of childbearing age as well as mothers' groups, and traditional birth attendants for better home-based maternal and child healthcare. The effectiveness of this approach has been demonstrated in a number of community-based participatory interventions, building on the idea that if community members take part in decision-making and bring local knowledge, experiences and problems to the fore, they are more likely to own and sustain solutions to improve their



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communities' health.

The evaluation of reproductive, maternal, newborn, and child health (RMNCH) by the Disease Control Priorities, Third Edition (DCP3) focuses on maternal conditions, childhood illness, and malnutrition.

Specifically, the chapters address acute illness and undernutrition in children, principally under age 5. It also covers maternal mortality, morbidity, stillbirth, and influences to pregnancy and pre-pregnancy. Volume 3 focuses on developments since the publication of DCP2 and will also include the transition to older childhood, in particular, the overlap and commonality with the child development volume. The DCP3 evaluation of these

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conditions produced three key findings: 1. There is significant difficulty in measuring the burden of key conditions such as unintended pregnancy, unsafe abortion, nonsexually transmitted infections, infertility, and violence against women. 2. Investments in the continuum of care can have significant returns for improved and equitable access, health, poverty, and health systems. 3. There is a large difference in how RMNCH conditions affect different income groups; investments in RMNCH can lessen the disparity in terms of both health and financial risk.

There is considerable interest at present in achieving the MDG-5 by implementation of the Free Maternal

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Health Policy embedded in the social health insurance to increase access to and affordability of health care in Ghana. Ghana's National Free Maternal Health Policy was passed into operation in July, 2007. This book aims to provide assessment of the explicit costs of maternal healthcare services rendered to NHIS clients in Ghana. The book revealed that there is increase utilization of the free maternal health service. The NHIS offers the entire maternal health package to their clients free of charge. There is a cost gap between the tariffs paid by the NHIA which uses the G-DRG compared to the cost of services rendered by the health providers if they use the itemized billing system. The challenges were the NHIA paying less to the

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service rendered by the health providers and payment of the claims on late. The free maternal health care in the Health insurance has become the alternative option of the health care financing in achieving the MDG-5 in Ghana.

This open access edited book brings together new research on the mechanisms by which maternal and reproductive health policies are formed and implemented in diverse locales around the world, from global policy spaces to sites of practice. The authors – both internationally respected anthropologists and new voices – demonstrate the value of ethnography and the utility of reproduction as a lens through which to

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generate rich insights into professionals ' and lay people ' s intimate encounters with policy. Authors look closely at core policy debates in the history of global maternal health across six different continents, including: Women ' s use of misoprostol for abortion in Burkina Faso The place of traditional birth attendants in global maternal health Donor-driven maternal health programs in Tanzania Efforts to integrate qualitative evidence in WHO maternal and child health policy-making Anthropologies of Global Maternal and Reproductive Health will engage readers interested in critical conversations about global health policy today. The broad range of foci makes it a valuable resource for teaching in medical anthropology, anthropology of

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reproduction, and interdisciplinary global health programs. The book will also find readership amongst critical public health scholars, health policy and systems researchers, and global public health practitioners.

South Asia Region (SAR) has decreased maternal mortality ratio (MMR) by 65 percent between 1990 and 2013, which was the greatest progress among all world regions. Such achievement implores the question, What made SAR stand out against what is predicted by standard socioeconomic outcomes? *Improving Maternal and Reproductive Health in South Asia: Drivers and Enablers* identifies the interventions and factors that

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contributed to reducing MMR and improving maternal and reproductive health (MRH) outcomes in SAR. In this study, the analytical framework assumes that improving MRH outcomes is influenced by a multitude of forces from within and outside the health system and considers factors at the household and community levels, as well as interventions in other sectors and factors in the enabling environment. The analysis is based on a structured literature review of the interventions in SAR countries, relevant international experience, and review of the best available evidence from systematic reviews. The focus of the analysis is mainly on assessing the effectiveness of interventions. The findings from this study indicate that the most

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effective interventions that prevent maternal mortality are those that address the intra-partum stage - the point where most maternal deaths occur - and include improving skilled birth attendance coverage, increasing institutional delivery rates, and scaling up access to emergency obstetric care. There is also adequate evidence that investing in family planning to increase contraceptive use also played a key role during the inter-partum phase by preventing unwanted pregnancies and thus averting the risk of maternal mortality in SAR countries. Outside the programmatic interventions, the levels of household income, women ' s education, and completion of secondary education of girls were also strongly correlated with improved MRH



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outcomes. Also, there is strong evidence that health financing schemes - both demand and supply side - and conditional cash transfer programs were effective in increasing the uptake of MRH services. The study points out to many other interventions with different degrees of effectiveness. The study also identified four major reasons for why SAR achieved this progress in MMR reduction. The best practices and evidence of what works synthesized in this study provide an important way forward for low- and middle-income countries toward achieving the health-related Sustainable Development Goals.

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This book presents a cross section of the work and concerns of social demographers worldwide, covering a broad range of topics from social structure through population structure to social policy; from fertility and mortality through migration to the way in which organisations deal with the demographic environment in which they operate. Topics addressed also include morbidity and health profiles and transitions, as well as policies and programs concerned with these and other issues. The volume touches on some of the major links between population and societal dynamics. It addresses

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demographic patterns and issues from micro-level, meso-level, and macro-level perspectives and helps put into focus the past, present and future of the mutual relations between population dynamics and societal responses. With a unique introductory chapter discussing the global unevenness of population growth today, its associations with inequality and the challenges it presents for the future, and a truly international approach to social and demographic change and policy responses, this book will serve as a valuable resource for professionals and students in sociology, demography, social policy and local governance.

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Governing Health Systems: For Nations and Communities Around the World examines the complex relationships between governance and performance in community and national health systems. Each chapter provides an in-depth case study, using both qualitative and quantitative methods, on health systems in many countries, including Uganda, Ghana, India, Zambia, Japan, Nigeria, Indonesia, Brazil, Palestine, and South Korea. The chapters were written by former Takemi Fellows, who were mid-career research fellows at the Harvard T.H. Chan School of Public Health, and their colleagues. This case study approach yields important findings as well as contextual insights about the challenges and accomplishments in addressing

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governance issues in national and community health systems around the world. Health policymakers around the world are struggling to address the multiple challenges of governing health systems. These challenges also represent important themes for the research mission of the Takemi Program in International Health at the Harvard T.H. Chan School of Public Health. This book is based on the program 's thirtieth anniversary symposium held in October 2013 at Harvard. The studies presented in this book—deep examinations of illustrative examples of health system governance for communities and nations—contribute to our knowledge about global health and assist policymakers in dealing with the complex practical

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problems of health systems. In short, this book addresses central questions about governing health systems—and why governance matters.

The fully revised second edition of this textbook offers a comprehensive introduction to theories of public policy and policymaking. The policy process is complex: it contains hundreds of people and organisations from various levels and types of government, from agencies, quasi- and non-governmental organisations, interest groups and the private and voluntary sectors. This book sets out the major concepts and theories that are vital for making sense of the complexity of public policy, and explores

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how to combine their insights when seeking to explain the policy process. While a wide range of topics are covered – from multi-level governance and punctuated equilibrium theory to 'Multiple Streams' analysis and feminist institutionalism – this engaging text draws out the common themes among the variety of studies considered and tackles three key questions: what is the story of each theory (or multiple theories); what does policy theory tell us about issues like 'evidence based policymaking'; and how 'universal' are policy theories designed in the Global North? This book is the perfect companion for undergraduate and postgraduate students studying public policy, whether focussed on theory, analysis or the policy process, and it is

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essential reading for all those on MPP or MPM programmes. New to this Edition: - New sections on power, feminist institutionalism, the institutional analysis and development framework, the narrative policy framework, social construction and policy design - A consideration of policy studies in relation to the Global South in an updated concluding chapter - More coverage of policy formulation and tools, the psychology of policymaking and complexity theory - Engaging discussions of punctuated equilibrium, the advocacy coalition framework and multiple streams analysis



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