

From Insight to Action: Mapping Kansas' Perinatal SUD System for Maternal Mortality Prevention

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Substance use disorders (SUDs), mental health conditions and intimate partner violence (IPV) often intersect during the pregnancy and postpartum period.

Maternal mortality prevention requires more than identifying risk. It requires coordinated systems that help people move from screening to support, treatment, safety and sustained postpartum care.



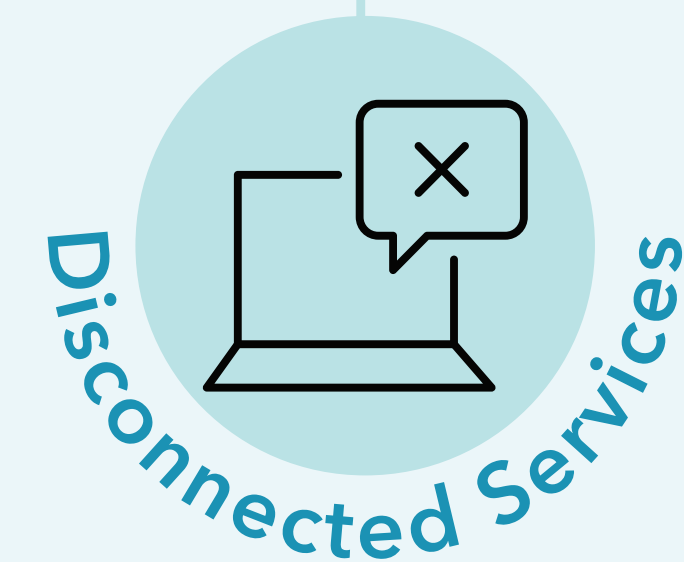
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Navigating a Fragmented System
I learned not to tell anyone when bad things were happening to me because it would only make things worse.

Patient concerns



MAVIS Action Priorities

- Early identification and prevention
- Expand evidence-based perinatal SUD care
- Harm reduction and overdose prevention
- Postpartum continuity
- Family-centered, cross-system coordination
- Data-informed quality improvement

Maternal health system goals



Moving from Identification to Support
I shared my experience with her, and she listened without judgment.

Why It Matters for Maternal Mortality Prevention

SUD-related maternal deaths are often connected to missed opportunities before, during and after pregnancy. Public health and MCH systems can reduce preventable deaths by strengthening the points where mothers fall through gaps in systems of care.