A JOINT MEMORIAL

REQUESTING THE DEPARTMENT OF HEALTH TO FORM A TASK FORCE TO DEVELOP AND DISSEMINATE WRITTEN INFORMATIONAL MATERIALS REGARDING THE NECESSARY CARE AND SUPPORT OF PRETERM INFANTS.

WHEREAS, most pregnancies last about forty weeks, which is considered full-term; and

WHEREAS, babies that are born before thirty-seven completed weeks of pregnancy are called premature, or preterm; and

WHEREAS, according to department of health statistics for 2005, more than one in ten births were considered preterm; and

WHEREAS, the rate of preterm births in New Mexico was eleven percent of live births in 2005, and eleven and two-tenths percent in 2006; and

WHEREAS, the rate of late preterm births, which are those births occurring between thirty-two and thirty-six weeks gestation, was seven and eight-tenths percent in 2006; and

WHEREAS, New Mexico is making progress in addressing preterm births and in providing services to pregnant women to decrease this rate; and

WHEREAS, according to the march of dimes, premature birth is a serious health problem, and preterm infants are at increased risk for newborn health complications as well as

lasting disabilities, such as mental retardation, cerebral palsy and lung and gastrointestinal problems; and

WHEREAS, preterm infants are more subject to hospitalization for such conditions as bronchiolitis, dehydration, jaundice and pneumonia; and

WHEREAS, the estimated medical, educational and lost productivity costs associated with preterm births in the United States was twenty-six billion dollars (\$26,000,000,000) in 2005; and

WHEREAS, preterm deliveries often result in low-birthweight babies, weighing less than five pounds; and

WHEREAS, low birth-weight is often associated with the development of diabetes and other chronic diseases later in life;

NOW, THEREFORE, BE IT RESOLVED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO that the department of health be requested to form a task force to develop and disseminate written informational materials regarding the necessary care and support of preterm infants; and

BE IT FURTHER RESOLVED that the task force include representation from the human services department, the children, youth and families department, hospitals, primary care clinics, community health councils and other health facilities and providers; and

BE IT FURTHER RESOLVED that the materials to be

developed take into consideration appropriate literacy levels, cultural considerations and language barriers; and

BE IT FURTHER RESOLVED that the materials to be developed address possible complications of preterm births and proper care and support for preterm babies, including specific information regarding the following:

- A. the unique health issues affecting preterm infants, such as the increased risk of developmental delay, nutritional challenges and special feeding needs, infection, vision and hearing impairment, jaundice, hyperactivity and respiratory problems;
- B. the proper care of preterm infants, including developmental screening and available health and support services;
- C. the importance of preventive measures such as vaccinations;
- D. the leading causes of hospitalization and factors contributing to increased morbidity and mortality of preterm infants; and
- E. the emotional and financial challenges faced by parents and families of preterm infants, and resources available to support them; and

BE IT FURTHER RESOLVED that the task force rely on organizations and individuals with expertise in caring for preterm infants in developing the materials; and

BE IT FURTHER RESOLVED that the task force review and evaluate existing materials developed by pharmaceutical and biomedical companies; and

BE IT FURTHER RESOLVED that the materials developed by the task force be distributed to medicaid providers, hospital neonatal intensive care units, pediatric intensive care units, maternal and child care providers, general hospitals and other entities determined by the task force to be appropriate to ensure that parents or guardians of preterm infants benefit from the materials; and

BE IT FURTHER RESOLVED that copies of this memorial be transmitted to the secretaries of health, human services and children, youth and families.