

# Every American Deserves an Equal Start: The Finnish Baby Box and Maternal-Infant Wellbeing in the United States

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## Background

**Pregnancy and childbirth are among the most vulnerable times in a person's life.** In addition to the increased need for social, financial and nutritional stability of pregnant people and infants, appropriate monitoring and healthcare access often means the difference between life or death. **Finland has one of the lowest infant mortality rates in the world** and is consistently ranked highly in maternal health, maternal and paternal equality, and childhood education. Finland's success has drawn international attention, particularly regarding their **dramatic decrease in infant mortality rates from the 1950's, amidst famine and disease outbreaks (52/1000 live born), to one of the lowest in the world in 2018 (1.6/1000 live born) in less than 70 years.** The Baby Box, a maternity package Finnish families receive upon attending provided antenatal care, has become a symbol of **Finnish commitment to maternal-infant health and equality** (ie. gender neutral items, and families of all socioeconomic status receive the same box). Some have speculated whether use of the baby box as a "sleep space" for newborns has played a role in the reduction of infant death in Finland. There are no studies supporting this claim. It is possible, however, that **the baby box and the Finnish ideals that surround it may yet play a role in global maternal-infant health**, according to a new study surveying the adoption of the baby box in 91 countries.



Finnish Baby Box, photo Kela

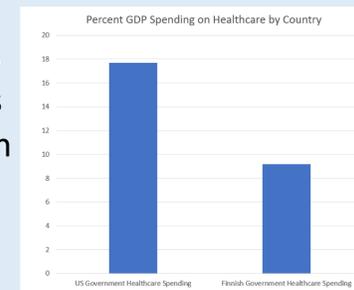
## Meeting a Need Systemically

Many cite Finland's **small, homogenous population** (5.5 mil, 338,000 km<sup>2</sup>) and remote, Nordic location as barriers to practically translating Finnish maternal-infant health tactics to the United States (330.8 mil, 9.8 million km<sup>2</sup>).

In reality, amidst disease and famine, Finland simply met a **nation-wide systemic need for maternal-infant healthcare and prioritized its most vulnerable citizens**, emphasizing sustainability, basic health and nutrition needs, and a comprehensive approach to long-term maternal-infant care. **US infant mortality rates for black babies are more than twice that of white babies**, with recent studies supporting **systemic racism** as the cause. While Finns are quick to point out that there is no "magic bullet" in saving babies' lives, perhaps Finnish ideas and ideals are still applicable to the US. To enhance maternal-infant wellbeing in the US, we, too, can implement **comprehensive approaches and prioritize our most vulnerable citizens**, especially in times of crisis.

## Social Support in Finland and the US

**Healthcare spending by the US government is among the highest in the world**, yet people giving birth in the US, either using private or government-subsidized insurance, pay over **\$4,000 USD for maternity care and hospital delivery** on average. Finland spends half of what the US spends (proportionally) on healthcare, the maternity grant or baby box amounts to 0.4% of child and parental benefits and allowances, and pregnant woman in Finland report spending less than **\$400 USD for maternity care and hospital delivery.** Financing healthy pregnancies and deliveries have major payoffs in the long run, both for the health of pregnant people and infants, as well as an economic value in ensuring healthy early starts. Increased spending does not necessarily equal increased health. **However, strategic support, especially around pregnancy, birth and infancy**, may provide important health benefits for at-risk babies.



## The Baby Box in the US: Need and Crisis

Alongside comprehensive care, Finnish Baby Box inspired maternity packages might also be of use in maternal-infant

wellbeing in the US. Resource-limited settings, such as **US Natural Disasters and Pandemics**, provide additional obstacles to the already resource-consuming experience of pregnancy and birth. Online shopping and telehealth may not bridge the gap between all pregnant people for antenatal care or baby items, especially in low-income scenarios where increasingly limited finances and time are diverted towards critical repairs, essential work, and unexpected costs, and families may not have access to internet or computers. Providing an emergency "baby box kit" with essentials for pregnant people and newborns during these pivotal moments with diapers or even condoms or breastfeeding support items may prove essential.



**US Migrant Populations** may face strained resources, no local family, language barriers, and fear of repercussions for contacting medical professionals among undocumented migrants. Providing culturally-appropriate essentials kits with vitamin supplements or baby-wearing slings, potentially as an incentive to attend no-strings-attached antenatal care or skilled attendant delivery with a same-language provider, may be a unique way to improve health outcomes for vulnerable pregnant people and babies in the US. **People Giving Birth in US Prisons** face unique physical and psychological challenges. One option to enhance wellbeing might include "baby boxes" with necessities from common brands that all parents use. This may provide relief from financial and logistical burdens of buying baby items in prison, as well as encourage a healthy start to life and bonding with self-care items or a baby's first book.

## Acknowledgments and References



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