

# Welcome!

We are so glad you are here!

We will get started shortly.  
In the meantime, we invite you to intentionally enter this space.



Silence your cell phone



Stretch



Close the door



Take a few deep breaths



Close browser windows



Emotionally release your to-do list



Check your audio and video



Take a bio break

## Collaborative Approaches to Addressing Maternal and Infant Health Disparities

Wednesday, November 3, 2021 | 4:30-4:55 pm ET



This session is being recorded.



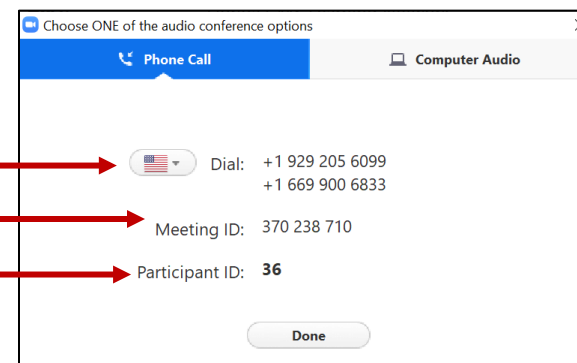
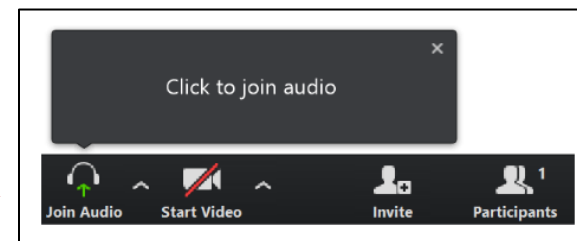
All participants are muted during this session.



Participants are encouraged to share comments via the Chat module and ask questions via the Q&A module in Whova (on the mobile app or browser).

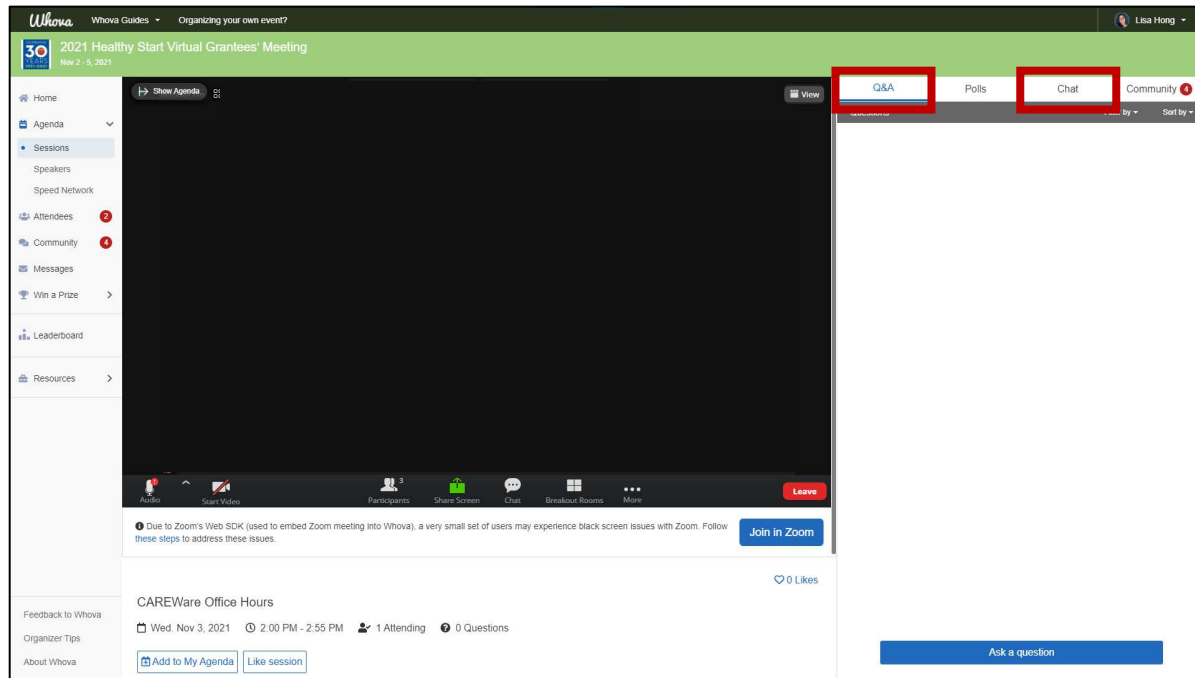
# Audio

- After you join the Zoom session, an audio conference box may appear.
  - If you do not see the box, click **'Join Audio'**
- From the audio conference box, select **'Phone Call'** or **'Computer Audio'**
  - If using the phone:
    - Dial one of the given numbers next to **'Dial'**
    - You will be prompted to enter the **Meeting ID**
    - Then you will be prompted to enter the **Participant ID**

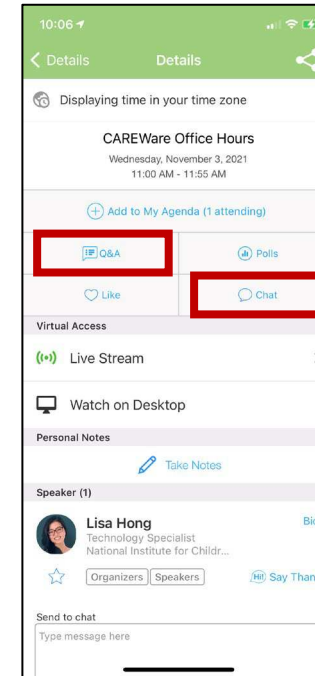


# Chat and Q&A via Whova

## Desktop Browser



## Mobile Application



# Technical Issues

If you experience any technical challenges with Whova,  
please email [support@whova.com](mailto:support@whova.com)

For all other questions,  
please email [healthystart@nichq.org](mailto:healthystart@nichq.org).

# Collaborative Approaches to Addressing Maternal and Infant Health Disparities

Plenary

Wednesday, November 3  
4:30 – 4:55 pm ET

*The Healthy Start TA & Support Center is operated by the National Institute for Children's Health Quality (NICHQ). This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number 1 UF5MC327500100 titled Supporting Healthy Start Performance Project.*





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**HEALTHY  
start**  
TA & SUPPORT CENTER

# Our Speakers

**Jessica Stieger, MPH, MSW, IBCLC CD(DONA)**

Program Manager, Infant Health

Association of Maternal and Child Health Programs  
(AMCHP)

**Kristina Wint, MPH**

Program Manager, Women's Health

Association of Maternal and Child Health Programs  
(AMCHP)

*2021 Healthy Start Virtual Grantees' Meeting  
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**#HealthyStartVGM2021**  
**#HealthyStartStrong**  
**@HS\_TASC @NICHQ**



# Collaborative Approaches to Addressing Maternal and Infant Health Inequities

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JESSICA STIEGER, MPH, MSW, IBCLC, CD(DONA)

KRISTINA WINT, MPH





# Who is AMCHP?

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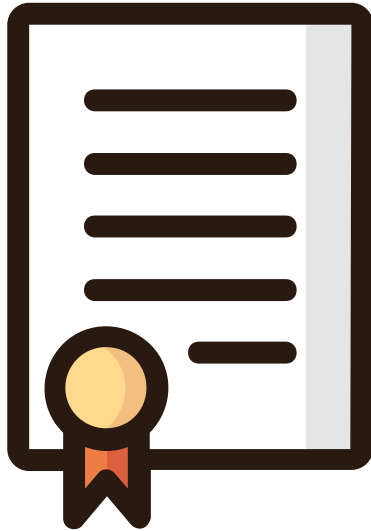
AMCHP leads and supports programs nationally to protect and promote the optimal health of women, children, youth families, and communities.



AMCHP envisions a nation that values and invests in the health and wellbeing of all women, children, youth, families, and communities so that they may thrive.

# What is Title V?

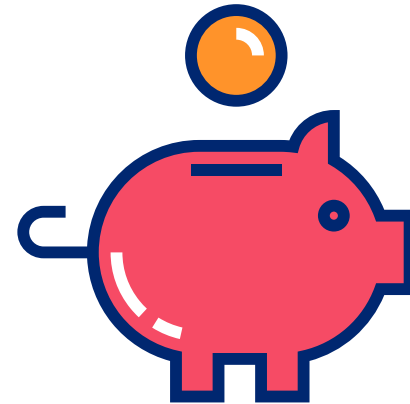
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The nation's longest standing public health legislation focused solely on improving the health of all mothers and children, including children with special health care needs

In 2017, the Title V Block Grant provided health care and public health services for an estimated 56 million people, including:

- 86% of all pregnant women,
- 99% of infants
- 55% of children nationwide benefitted from a Title V-supported service



# Foundation for the WIH Team

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Racism is the root cause and engine of the racial disparities in maternal health in the U.S.

Inequitable practices are ‘baked into’ institutional histories, policies and systems

*“We have no answer that Black women do not already possess”*

There’s no health equity without community engagement

“Evidence” should be led by lived experience and cultural rigor

# Women's Health

# Women's Health

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Three of our collaborations directed at maternal mortality and advancing health equity in maternity care



AIM Reducing Peripartum Racial & Ethnic Disparities Bundle Test of Integration



Enhancing Reviews & Surveillance to Eliminate Maternal Mortality (ERASE MM)



Safer Childbirth Cities Initiative Community of Practice

# Alliance for Innovation in Maternal Health

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## READINESS

### *Every health system*

- Establish systems to accurately document self-identified race, ethnicity, and primary language.
  - Provide system-wide staff education and training on how to ask demographic intake questions.
  - Ensure that patients understand why race, ethnicity, and language data are being collected.
  - Ensure that race, ethnicity, and language data are accessible in the electronic medical record.
  - Evaluate non-English language proficiency (e.g. Spanish proficiency) for providers who communicate with patients in languages other than English.
  - Educate all staff (e.g., inpatient, outpatient, community-based) on interpreter services available within the healthcare system.
- Provide staff-wide education on:
  - Peripartum racial and ethnic disparities and their root causes.
  - Best practices for shared decision making.
- Engage diverse patient, family, and community advocates who can represent important community partnerships on quality and safety leadership teams.

# Bundle Opportunities

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Northwell Health's Long Island Jewish Medical Center in collaboration with two community organizations, Public Health Solutions and Ancient Song Doula Services, developed a project to explore what the Disparities bundle is in practice

Following the lead of the partner organizations the project focused on the perceptions and needs of the community

Findings revealed that a system of accountability is needed and is currently in development



# ERASE MM Initiative

**Maternal Mortality Review Committees** (MMRCs) are multidisciplinary committees in states and cities that perform comprehensive reviews of deaths among women within a year of the end of a pregnancy.

**CDC funds approximately half the MMRCs** to identify, review, and characterize maternal deaths; and identify prevention opportunities.

**ReviewtoAction.org** is a website developed by AMCHP for promoting best practices for MMRCs.



# Members Critical to MMRCs

Organizations	Core Disciplines	Specialty Disciplines
Academic Institutions	Anesthesiology	Addiction Counseling
Behavioral Health Agencies	Community Advocate	Cardiology
Blood Banks	Community Birth Workers	Clergy
Community-Based Doula Program	Family Medicine	Community Leadership
Federally Qualified Health Centers	Forensic Pathology	Critical Care Medicine
FIMR/CDR Programs	Maternal Fetal Medicine/ Perinatology	Emergency Response
<b>Healthy Start Agencies</b>	Nurse Midwifery	Epidemiology
Homeless Services	Obstetrics and Gynecology	Genetics
Hospitals/ Hospital Associations	Patient/Family Advocate	Home Nursing

# Community Stakeholders in MMRCs

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Approximately **1/3 of deaths** occur **1 week to 1 year postpartum** (outside the hospital), but there is overwhelming investment in the labor and delivery environment

MMRCs **rarely identify community factors** as contributors to a maternal death, which is not consistent with what we know about the protective or mediating role of community in the production of health

Without community stakeholders, **MMRCs will not have a full understanding of all the causes and contexts** behind the death of a mother

Community stakeholders, like **Healthy Start programs**, play a key role in every step of the **MMRC process**

# Safer Childbirth Cities Initiative Community of Practice

Launched in 2018 by Merck for Mothers, which is a \$500 million global initiative to help end preventable maternal deaths

Focuses on **community organizations in US cities with a high burden of maternal mortality and morbidity** (currently funds 10 cities)

**Goal:** to foster local solutions to help cities become safer and more equitable places to birth

AMCHP in collaboration with the National Healthy Start Association is hosting a Community of Practice to support these cities as they develop, implement, and sustain their work

# Safer Childbirth Cities Initiative Community of Practice

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Baltimore, MD

Brooklyn, NY

Camden, NJ

Newark, NJ

Philadelphia, PA

Pittsburgh, PA

Trenton, NJ

Washington, DC

Chicago, IL

Columbus, OH

**Safer**  
**Childbirth**  
Cities



Detroit, MI

ST. Louis, MO

Atlanta, GA

Austin, TX

Jackson, MS

New Orleans, LA

Norfolk, VA

Tampa, FL

Tulsa, OK

San Francisco, CA

# Infant Health

# Engaging with communities

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Examine internal organizational culture and values

Commit resources to anti-racism efforts within the organization

Partner with truly community-based and community-centered organizations. These include organizations that:

- Have the trust of the community they serve
- Have leadership and an organizational structure that reflects the community
- Have a track record of delivering quality services and engaging communities in the design of their work

~Aza Nedhari, Executive Director, Mamatoto Village

ENGAGING THE POWER OF TITLE V FOR  
EQUITY IN PRETERM BIRTH PREVENTION

## Recommendations for Title V Programs: Co-Creating an Equitable Future with the Wisdom of Communities

This issue brief is part of a four-part series that explores the unique power of the Title V Maternal and Child Health (MCH) Services Block Grant to support anti-racist strategies and intentionally address the roots of racial injustice in maternal and infant health, including the prevention of preterm birth. Each issue brief describes how MCH programs can disrupt structural and institutional racism and shift power toward the expertise of people who birth, communities, and the organizations a community trusts to implement solutions. The series was produced with the support of the Pritzker Children's Initiative.

**AMCHP** ISSUE BRIEF  
ASSOCIATION OF MATERNAL & CHILD HEALTH PROGRAMS

# Internal Evaluation of Organizational Culture

~Aza Nedhari, Executive Director of  
Mamatoto Village



Integrity



Accountability to the community served and the  
people hired



Transparency



Commitment to ongoing examination



Justice-centered framework

# Elements of Equitable Partnership

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Co-creation

Honor and listen to  
families and  
community  
partners

Understanding your  
place in undoing  
institutional  
problems

Create space and  
opportunities for  
sharing thoughts  
and feeling

Create pathways  
for sustainable  
relationships



Healthy  
Beginnings with  
Title V:  
Advancing Anti-  
Racism in  
Preterm Birth  
Prevention

A learning and practice cohort for state MCH programs with a desire to build transformational partnerships, dismantle policies and programs that perpetuate racism through inequities in funding, and support the sustainment and spread of community innovations.

# State-Community Partnerships

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Sista Midwife Productions & the Louisiana Department of Health

Urban Baby Beginnings & the Virginia Department of Health

Roots4Change Cooperative & the Wisconsin Department of Health Services

Alaska Native Birth Workers Community & the Alaska Department of Health and Social Services

Minnesota Indian Women's Resource Center & the Minnesota Department of Health

Healthy Start, Inc. Pittsburgh & the Pennsylvania Department of Health

Thank you!

Kristina Wint

[kwint@amchp.org](mailto:kwint@amchp.org)

Jessica Stieger

[jstieger@amchp.org](mailto:jstieger@amchp.org)

# Q&A

*2021 Healthy Start Virtual Grantees' Meeting  
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**#HealthyStartVGM2021**  
**#HealthyStartStrong**  
**@HS\_TASC @NICHQ**

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**start**  
TA & SUPPORT CENTER

The logo graphic for Healthy Start features a stylized plant with four leaves in shades of orange and red, positioned to the right of the text.



# Day 1 Wrap-up

## Plenary

*Wednesday, November 3  
4:55-5 pm ET*

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A logo graphic consisting of four colored squares (two orange, two red) arranged in a 2x2 grid, with a green plant stem growing from the center.



# We hope you enjoyed Day 1 of the VGM!

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# Thank you to the 2021 VGM Planning Committee!

## ***Division of Healthy Start and Perinatal Services***

Benita Baker, MS, Branch Chief  
Cardora Barnes, MS, Project Officer  
Lina Barrett, MPH, Data Lead  
Kevin Chapman, Project Officer

## ***National Healthy Start Association***

Deborah Frazier, CEO  
Caroline Valencia, Program Manager

## ***Healthy Start Project Directors***

Timika Anderson-Reeves, PhD, MSW, Project Director, Access Community Health Network  
Melony Baty, MA, Project Director, South Phoenix Healthy Start  
Vynette Moore, Maternal and Child Health Administrator, Shields for Families  
Jada Shirriel, MS, CLC Project Director, Pittsburgh Healthy Start  
Amy Thuren, Project Director, Health Care Coalition of Southern Oregon, Inc.  
Melanie Williams, Project Director, Delta Health Alliance  
Natasha Worthy, Project Director, Georgia Department of Public Health

# Healthy Start COIN Video

- **Watch the video**, which shares information about the Healthy Start COIN and what the team has been working on over the past year!
- **Go to the discussion board** in Whova and connect with the HS COIN members
- **Visit EPIC** to learn more about the COIN





# 2021 VGM Swag!



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#HealthyStartVGM2021  
#HealthyStartStrong  
@HS\_TASC @NICHQ

**CELEBRATING 30 YEARS OF GIVING WOMEN, INFANTS, AND FAMILIES A HEALTHY START**

**1989**  
President George H. W. Bush creates the interagency White House Task Force to Reduce Infant Mortality. Healthy Start is one of 18 proposals submitted to the White House Task Force.

**1991**  
The Secretary's Advisory Committee on Infant Mortality (SACIM), now called the Advisory Committee on Infant and Maternal Mortality or ACIMM, is formed. ACIMM advises the Secretary on Department of Health and Human Services' (HHS) programs that are directed at reducing infant and maternal mortality and improving the health status of pregnant women and infants.

**1994**  
7 sites are added to the Phase I Healthy Start Initiative as "special projects" and funded by the March of Dimes, bringing the total of demonstration projects to 22.

**1997**  
As part of the Replication Phase of Healthy Start, additional sites are added to reproduce the model of the original 15 programs by conducting outreach, case management, and health education.

**1997-2001**  
New Healthy Start Funding Cycle.

**1997**  
The National Healthy Start Association (NHSA) is established by several project directors from the original 16 Healthy Start sites. The membership organization focuses on advocacy and its efforts led to Healthy Start's first federal authorization.

**2000**  
Healthy Start is authorized by Congress as part of the Children's Health Act.

**2001-2005**  
New Healthy Start Funding Cycle. Healthy Start expands its scope beyond providing comprehensive health services. It focus on supporting child development from conception to age 2 years, screening for maternal depression, promoting father involvement, and uplifting consumer voices.

**2005-2009**  
New Healthy Start Funding Cycle.

**2009-2014**  
New Healthy Start Funding Cycle. There are now 105 Healthy Start sites located in 39 states, Puerto Rico, and the District of Columbia.

**2013**  
SACIM issues recommendations and a framework for a national strategy to reduce infant mortality. This reaffirms need for continued federal investment in Healthy Start and similar programs (e.g., Title V/MCHS Services Block Grant, MIECHV Program, WIC, etc.).

**2014-2019**  
New Healthy Start Funding Cycle. Healthy Start establishes five programmatic approaches: improve women's health; promote quality services; strengthen family resilience; achieve Collective Impact; and increase accountability through quality improvement, performance monitoring and evaluation.

**2016**  
Healthy Start celebrates its 25th anniversary.

**2019-2024**  
New Healthy Start Funding Cycle. The 103 funded projects represent rural, urban, tribal, and border communities in 37 states, the District of Columbia, and Puerto Rico. Healthy Start refines its programmatic approaches to focus on: Improving women's health; improving family health and wellness; promoting systems change; and assuring impact and effectiveness through workforce development, data collection, quality improvement, performance monitoring, and evaluation.

**2020**  
Healthy Start Reauthorization Act is enacted.

**2021**  
Healthy Start celebrates its 30th anniversary.

HEALTHY START TA & SUPPORT CENTER | NICHQ NATIONAL INFANT MORTALITY PREVENTION CENTER

We are pleased to be able to gift each Healthy Start project 2021 VGM Swag!

Each site will receive 3 bags, 3 pens, 3 HS timelines, and one copy of *Medical Apartheid*.



Learn the Healthy Start dance and show us your moves on social media! Remember to tag @HS\_TASC and @NICHQ and use the hashtags #HealthyStartVGM 2021 and #HealthyStartStrong

# Day 1 Evaluation Survey

Please take 5 minutes to  
complete our Day 1  
evaluation!

Scan the QR Code or visit  
[https://link.nichq.org/VGM-  
Day-1-Evaluation](https://link.nichq.org/VGM-Day-1-Evaluation)



***We truly value your  
feedback!***



# We look forward to seeing you tomorrow!

- **Optional JavaTalk at 10:15 am ET**
- **Optional Mindfulness at 11 am ET**
- **First Plenary: A Message from the MCHB Associate Administrator at 11:15 am ET**

# 2021 Healthy Start Virtual Grantees' Meeting | Day 2 – November 4, 2021

Start (ET)	End (ET)	Session
10:15 AM	11:00 AM	JavaTalk - <i>optional</i>
11:00 AM	11:15 AM	Mindfulness - <i>optional</i>
11:15 AM	12:00 PM	A Message from the MCHB Associate Administrator
12:15 PM	12:45 PM	Alliance for Innovation on Maternal Health Community Care Initiative (AIM CCI)
12:45 PM	1:15 PM	Healthy Start TA & Support Center Mental Health Training Opportunities
1:15 PM	2:00 PM	Grants Management
2:00 PM	2:55 PM	CAREWare Office Hours & Networking Cafés
3:00 PM	4:20 PM	Breakout Sessions
4:25 PM	4:55 PM	Division of Healthy Start and Perinatal Services Update
4:55 PM	5:00 PM	Wrap-up
5:00 PM	6:00 PM	Networking Table - <i>optional</i>

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**Not quite ready to say  
goodbye?**

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# Join a Speed Networking Table at 5 pm ET!

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# Networking Table Instructions

1. **Sign into Whova** on a desktop browser (<https://2021hsvgm.events.whova.com>) or in the mobile application
2. **Go to the Agenda**
3. **Click on “Speed Network”**
  - Select the session labeled **Tue Nov 2, 7:15-8:15 pm**
  - To sign up for the Networking Tables that will be hosted on Wednesday of Thursday evening, click on the session and select **RSVP** in the upper righthand corner of your screen





# Join us at 5:30 pm ET for Healthy Start Family Feud!

*Visit the agenda in Whova to join*

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Thank You!

