



Change Ideas to Grow, Nurture, and Lift (CIGNAL) Ideas For Maternal Mortality and Morbidity

In Year 1 of the 2019-2024 Healthy Start (HS) grant cycle, a number of HS projects received supplemental funding from the Division of Healthy Start and Perinatal Services (DHSPS) to improve clinical care in order to address maternal mortality and morbidity within their communities. To help the grantees focus their efforts, the Healthy Start TA & Support Center (TASC) launched a two-part project called CIGNAL: Change Ideas to Grow, Nurture, and Lift Ideas for Maternal Mortality and Morbidity (MMM). CIGNAL for MMM aimed to enhance and strengthen the capacity of HS grantees to identify and execute change ideas to reduce MMM in their communities. The project was led in partnership with Quality Improvement (QI) Advisor and Healthy Start Faculty Planning Committee Member, Jane Taylor EdD, MBA, MHA.

First, TASC hosted a two-hour expert meeting with ten subject matter experts in the field of maternal and child health. The experts worked to identify and explore potential change ideas related to MMM for HS communities - specifically issues and challenges that put Black women at the highest risk for MMM. The experts then brainstormed strategies that HS programs can implement to intervene at specific points along the continuum of care and reduce MMM.

TASC then hosted a webinar for grantees, which introduced the key issues and strategies, highlighted stories from HS grantees, and provided participants with resources and tools for embracing a QI approach to testing the strategies in their own communities.

Challenges Around MMM for the Healthy Start Community identified by CIGNAL experts

1. Widespread **denial, dismissal, and disrespect of women's concerns and health issues** by the health care system.
2. The issue goes beyond physical access to care. It starts before preconception and **is a life course issue**.
3. The majority of deaths occur in the first year postpartum, not in the hospital. We need to **address these issues when and where they're occurring**.
4. We need to **address the technological barriers** to connecting with women (e.g., limited access to internet, computers, cell phones, etc.).

Challenges Around MMM for the Healthy Start Community identified by Healthy Start grantees

1. Limited resources
2. Lack of culturally reflective providers
3. Racism in the health care system, policies, and practices
4. Reactive, rather than proactive, efforts (e.g., grief counseling)
5. Ongoing restrictions due to COVID-19
6. Lack of understanding of the factors driving MMM

Expert-identified Strategies

FOR ADDRESSING MMM:

1. **Create an environment** where:
 - Friendly, trustworthy, respectful care is provided **by practitioners who look like the community being served**
 - Providers bring medical knowledge and **women bring contextual knowledge** (i.e., women are recognized as experts on themselves)
 - A system of responsibility exists that **holds providers accountable for providing respectful care**
2. **Strengthen fatherhood component of Healthy Start** to empower and support fathers/partners in playing a key role in reducing MMM
3. Work within the Healthy Start community and with our external partners to **promote implicit bias training**
4. **Promote advocacy training** for Healthy Start consumers, invite consumers in to advise on change idea strategies, and compensate consumers for their time
5. Create community hubs in order to **centralize and co-locate services** for women, fathers, and families
6. **Leverage Healthy Start CANs** to be part of a larger collective working to reduce MMM at both the local and state level

Grantee-identified Strategies

FOR ADDRESSING PMBH IN THE HEALTHY START COMMUNITY:

1. **Establish partnerships** with regional perinatal systems and/or federally qualified health centers
2. **Put memorandums of understanding (MoUs) in place** with community organizations **to build partnerships**
3. **Expand access to mental health services** by hiring or forming partnerships with mental health professionals
4. **Utilize nurse practitioners** to provide **services for women with multiple risk factors**
5. Practice **trauma-informed and evidence-based care**

Case Studies: Healthy Start Projects That Are Actively Addressing MMM:

REACHUP Inc. (Tampa, Florida)

- Serves Hillsborough County, where the MMM risk for Black women is 2-3 times that of their non-Hispanic White counterparts
- Participates in the Florida Steering Committee for Perinatal Quality Collaboratives
- Utilizes Maternal Mortality Review (MMR) and Infant Mortality Review Committees
- Engages in community-based participatory research
- Developed meaningful male involvement networks (e.g., GROWTH with Doulas and Dads)
- Expanded its doula services, including supporting Black, Brown, and Indigenous birth workers

REACHUP
where there's a will, we are the way

Missouri Bootheel Healthy Start (Sikeston, Missouri)

- Black maternal mortality rate in Missouri is double the U.S. national rate and more than triple the rate for non-Hispanic White women in Missouri
- Expanded mental health services/counseling for mothers, fathers, children, and families
- Participated in the HRSA Trauma-informed Care Community of Practice (TIC CoP) and implements TIC principles, including staff wellness self-assessments
- Hosts learning collaborative workshops on MMM for the community
- Developed a soundproof telehealth room to support case management, behavioral health, virtual meetings, health education, and provider meetings with clients



Potential Resources & Partnerships

- Alliance for Innovation on Maternal Health Community Care (AIM-CCI) – Develops and implements non-hospital maternal safety bundles within community-based organizations and outpatient clinical settings
- ShowYourLoveToday.com – Preconception health resources for consumers
- Before&Beyond.org – Preconception health resources for providers
- Preconception Health & Health Care Initiative (PCHHC) National Network – Pre-and inter-conception news, events, and research updates
- NewMomHealth.com and SaludMadre.com – 4th Trimester Project’s Postpartum Resource Hub in English and Spanish
- Maternal Health Learning & Innovation Center (MHLIC) – National resource center for eliminating maternal health inequities and improving well-being for all families in the U.S.
- Enhancing Reviews and Surveillance to Eliminate Maternal Mortality (Erase MM Initiative) – Support for agencies and organizations that coordinate and manage MMR Committees to identify, review, and characterize maternal deaths, and identify prevention opportunities
- ReviewtoAction.org – Promotes the MMR process as the best way to understand why maternal mortality in the United States is increasing

Other Resources

- Request 1:1 technical assistance with Quality Improvement Advisor, Jane Taylor, to help your HS project further develop and test change idea strategies. To request TA, visit the EPIC website, click the “HS EPIC Center Tab” and select “Request Technical Assistance.”
- Connect with the Healthy Start TA & Support Center at healthystart@nichq.org

