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MATERNAL CHILD HEALTH NEWSLETTER

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES ★ Health.Mo.Gov ★ VOLUME 3 ★ ISSUE 1

MCH Communiqué

The Public Health Workforce Interests and Needs Survey ([PH WINS](#)) conducted between September 2021 and January 2022 revealed that responding to the COVID-19 pandemic increased stress and burnout among public health workers. Despite this, the survey found that public health workers are still dedicated to their work, with 79% satisfied with their job and 68% satisfied with their organization. However, this dedication should not overshadow the underlying challenges the public health workforce faces, especially for the MCH workforce, which is critical in improving the health and well-being of mothers and children in communities nationwide. The nature of our work can be emotionally and physically demanding. We are confronted with complex challenges, including maternal and infant mortality, mental health and substance use disorders, and social drivers of health. These challenges are amplified by resource constraints like limited funding and understaffing, leading to stress and burnout, which compromise job effectiveness and well-being.

Recognizing signs of burnout and prioritizing MCH workforce well-being is crucial. Although not classified as a medical condition, the World Health Organization considers burnout an occupational phenomenon. Burnout is defined as a syndrome resulting from chronic workplace stress, and it is characterized by feelings of exhaustion, mental distance from one's job, negativism, and reduced professional efficacy.

Acknowledging the MCH workforce's challenges and implementing strategies to support their well-being is essential, as self-care is a personal choice and a professional responsibility. Self-care

encompasses a range of practices that promote physical, emotional, and mental well-being. At the organizational level, prioritizing self-care involves encouraging and facilitating a healthy work-life balance, providing flexible work schedules, allowing time off for personal and family commitments, and promoting breaks during the workday. Organizations can also offer wellness programs focusing on physical and mental health, such as yoga, meditation, massage, and nutrition workshops. The [WorkWell Missouri toolkit](#) serves as a comprehensive guide for organizations, assisting in implementing and evaluating these initiatives.

On an individual level, we must recognize the importance of prioritizing our well-being. Understanding that neglecting personal health can harm short-term performance and long-term career sustainability, individuals must embrace self-care practices. Whether it's mindfulness, regular physical activity, reading, adequate sleep, nutritious meals, music, or connecting with loved ones, prioritizing self-care contributes to individual resilience and overall workforce health.

A quote by Eleanor Brown underscores the importance of self-care: "Rest and self-care are so important. When you take time to replenish your spirit, it allows you to serve others from the overflow. You cannot serve from an empty vessel." As we navigate the demands of our daily responsibilities, it becomes increasingly evident that we cannot effectively serve others if we neglect our health. Prioritizing self-care can be challenging but can be achieved by implementing one habit at a time. As the spring season approaches and the weather warms up, I will challenge myself to incorporate at

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PROGRAM HIGHLIGHTS

Missouri Maternal Health Action Network Updates

The Missouri Maternal Health Action Network held its first quarterly meeting of FFY 2024 on Dec. 5, 2023. Listen to the [recording](#). The meeting highlighted the voices of mothers with lived experience. It included:

- A review and update of Network activities.
- A presentation on the Missouri Perinatal Access Program (MO-PAP).
- A region-specific breakout session led by the DHSS MCH Services Program.
- A spotlight on workgroup and leadership opportunities within the Action Network.

Wendy Ell, MO-CPAP Executive Director, summarized how MO-PAP aims to improve maternal health access by promoting universal screening for behavioral health among pregnant and postpartum individuals and increasing the detection, diagnosis and treatment of mental health and substance use conditions.

For additional information, contact Wendy Ell at ellw@health.missouri.edu.

What's next for the Action Network?

The Action Network will continue to foster effective cross-system collaboration to enhance service delivery for mothers affected by substance use disorder (SUD).

- We are seeking members interested in joining a core priority area workgroup. Workgroups establish intentional collaborations and strategic action plans to address the following:
 - Barriers affecting cross-system collaboration.
 - Delivery of support services to mothers affected by SUD.
 - Access and navigation of support services to mothers affected by SUD.

If you are interested in joining or leading a workgroup, please complete the workgroup sign-up form.

- We will continue to partner with mothers with lived experience to include their voices in the decision-making process. If you are a mother with lived experience or know a mother willing to share their story, complete: [My Story](#). If you are a mother with lived experience or know a mother who may benefit from being a part of the Moms' Advocacy Network, contact mo_actionnetwork@umkc.edu.

About the Moms' Advocacy Network and Leadership Academy:

The **Leadership & Self-Advocacy Academy** will provide opportunities for mothers affected by SUD to have their voices heard and be at the decision-making table as partners. Moms who complete the Leadership & Self-Advocacy Academy will:

- Feel empowered and supported.
- Gain knowledge, experience, and skills that foster personal growth and transformational change and promote self-informed decision-making through the life course perspective.
- Receive resources and education needed to access and navigate support services.
- Receive transformational education delivered to improve the overall outcome for mothers affected by prenatal and postpartum SUD, and
- Receive compensation for their invaluable time and dedication.

You can find more information about the Action Network in previous editions of the newsletter and by visiting the Action Network website at moactionnetwork.org or following us on [Facebook @MO Maternal Health Action Network](#). We would like to keep our stakeholders connected. Please share [system updates and organizational news](#) here to be featured in the quarterly issue brief or on the Action Network website and Facebook page. If you have any questions about the action network, contact Danielle Chiang, PhD, Principal Investigator, at mo_actionnetwork@umkc.edu.

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least one 15-minute walk into my workday. If you also decide to do this, consider not doing it alone; invite a co-worker to join you. This simple practice promotes individual well-being and fosters camaraderie within the workplace.

Prioritizing self-care is a shared responsibility between individuals and organizations, benefiting both individual well-being and the health and resilience of the workforce. By recognizing and implementing strategies to support the well-being of the MCH workforce, we can create a sustainable and effective workforce capable of addressing our communities' complex health challenges.

“Rest and self-care are so important. When you take time to replenish your spirit, it allows you to serve others from the overflow. You cannot serve from an empty vessel.”

Eleanor Brown

Resource Guide

- [3 Signs It's Burnout and Not Just Stress](#)
- [4 Things to Do If You're Burning Out](#)
- [UCLA Mindful App](#)
- [10-minute Mindfulness Meditation](#)
- [Stretches at Your Desk \(7mins\)](#)
- [E-book: 10 essential easy changes to quickly boost your mood, reduce your stress and increase your energy](#)



If you have questions, contact Nina Nganga, MPH, MCH Coordinator, at Nina.Nganga@health.mo.gov.

Randolph County Health Department HOME VISITING PROGRAM

A Success Story

The Randolph County Health Department's Healthy Families America (HFA) Home Visiting Program promotes mental health services to families. One mother, who was initially hesitant, was ultimately persuaded to seek mental health support through the efforts of a dedicated home visitor. The mom was in foster care at the time of enrollment and had been in the foster care system for some time.

Throughout their interactions, the home visitor consistently provided support, initiating discussions about counseling referrals after depression screenings or emotional crises. Despite multiple attempts, the client initially declined, citing past negative experiences with counselors who left her feeling uncomfortable and unhelped. In a significant breakthrough this past year, the home visitor delved deeper into the conversation by asking the client about the qualities she sought in a counselor that would make her feel comfortable enough to receive mental health services. The mom expressed the desire for a culturally diverse counselor who could better understand her. In response, the home visitor offered to research local diverse counselors, demonstrating a commitment to addressing the client's specific needs. As a result, the mother has now actively engaged in counseling for several months, describing the experience as a joyful weekly commitment she makes for herself. She has identified her counselor as an additional support person she can contact if needed.

Another dedicated home visitor has been actively assisting a family that transitioned from a previous home visitor. After overcoming initial hesitations, this family has also successfully enrolled in counseling under the guidance of the new home visitor. During their initial interactions, the client shared that she had previously been diagnosed with depression and other mental health disorders. By creating a safe space for the mother, the home visitor successfully facilitated open discussions about the emotional challenges and trauma the client had experienced throughout her life. This newfound understanding allowed the home visitor to collaborate with the mom on goal planning to re-engage with her counselor. As a result of this collaborative effort, the mom has continued to attend counseling appointments, actively seeking support for her mental health.

These success stories highlight the positive impact of the tailored approach taken by the dedicated home visitors at the [Randolph County Health Department](#).



PROGRAM SPOTLIGHT

Winnie Basilua, an intern with the Missouri Department of Health and Senior Services, Maternal Child, interviewed Carie Mellenthin, Senior Manager of Strategic Initiatives at Generate Health and Manager of the Bloom Network Initiative. Carie joined Generate Health almost three and a half years ago, driven by her alignment with the organization's mission and vision.



Winnie Basilua, MD
St. Louis University MPH intern

The Bloom Network initiative

1. Please tell us about the Bloom Network Initiative. What is the purpose of the initiative?

The Bloom Network Initiative is a coordinated network that provides community-based quality care to families and expectant parents across the St. Louis region. The initiative addresses home visitation, perinatal behavioral health and safe sleep. These priorities arose after conversations with community leaders raised the need to improve access to culturally congruent home visiting, perinatal behavioral health and safe sleep education. While the initiative does not provide direct care services, it acts as an intermediary, facilitating collaboration between health and social services providers and organizations to improve service delivery to Black families.

2. How does the Bloom Network Initiative support the Maternal Child Health (MCH) population?

Since 2021, the Bloom Network has convened community members and other MCH partners and providers to improve the delivery of care to Black families. The network supports the MCH population by improving access to home visitation, perinatal behavioral health and safe sleep services.

- The Home Visitation Program provides a free service for parents who are pregnant or have a child under five years old. A feature of the program is the coordinated referral and intake system (CRIS) that facilitates prompt referrals. The CRIS is a no-wrong-door virtual referral system for families. Anyone—a parent, social worker, doctor, friend, or family member—can complete basic eligibility questions for the parent and child through the [online referral form](#). Then, they will be matched with a local home visiting partner organization in less than one week. The referral form was designed in collaboration with the community to ensure it is easy to use.
- The Perinatal Behavioral Health Initiative (PBHI) connects hospitals, social services and behavioral health organizations to convene the St. Louis region around Black moms' most significant behavioral health needs. Specifically, it brings together providers from the mental/behavioral health fields who specialize in perinatal mood and anxiety disorders, individual counseling, substance use disorder, smoking cessation, and more. Partners involved in the PHBI have been actively collaborating for over 10 years and have collaborated to create a universal behavioral health screening protocol. PHBI also coordinates the Perinatal Resource Network, which promotes universal screening for behavioral health concerns for pregnant and postpartum mothers and helps facilitate warm hand-offs to behavioral health services as needed.
- The Safe Sleep Collaborative brings together community partners who work on safe sleep efforts in the St. Louis region. It accomplishes this by increasing access to safe sleep resources, including providing a safe sleep environment and education on safe sleep practices for low-income families.

3. Please share any challenges you have encountered in your work with the Bloom Network Initiative.

The Bloom Network Initiative has faced several challenges. Chief among them was the impact of the COVID-19 pandemic, which prompted a shift in how partners and communities approached their work. Due to limitations on in-person services, partner organizations had to shift to providing services virtually. This shift also presented a challenge for families without internet access. Additionally, we had to reassess our priorities and adapt to the changing needs of families. For example, the focus transitioned from

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routine home visiting services to addressing fundamental needs such as food security and mitigating income loss. Also, the Consumer Advisory Board (CAB) had to shift its conversations from home visiting services to focus on self-care and leveraging available resources—highlighting the resilience and adaptability required to navigate the unprecedented challenges. The CAB comprises local residents who have participated in home visitation and service providers interested in improving their services to better serve Black families in the region. The CAB advises providers on providing culturally appropriate care to better engage communities and retain families seeking their services.

Moreover, the pandemic called attention to existing health disparities, amplifying the urgency for conversations on equitable solutions and a collective commitment to advancing health equity. We found ourselves addressing the immediate crisis of the pandemic and, at the same time, advocating for systemic changes to address the root causes of disparities.

Another formidable challenge is the sustainability of funding, a critical factor influencing the execution of essential tasks and the longevity of collaborations within the network. Cognizant of the importance of financial stability, we have proactively responded by convening funders' symposiums. These symposiums provide a platform for funders to unite, fostering discussions on sustainable funding models and their broader implications.

4. Please share a success story from the Bloom Network Initiative

A noteworthy success lies in the home visitation collaborative effort, where diverse organizations united to create a strategic plan to address home visiting during the challenging times of COVID-19. Central to this success was the implementation of the CRIS tool, which has streamlined the referral process for home visiting services. By leveraging this collaborative referral and information system, the Bloom Network Initiative hopes to increase the timeliness of referrals. This will ensure that families in need receive support promptly and do not fall through the cracks. An evaluation of the effectiveness of the CRIS tool is still ongoing.

Another critical success has been establishing data agreements with diverse partners to collect and synthesize data from home visiting programs in Missouri. The aim is to use the data to drive action by identifying service gaps and developing strategies to meet the needs of families and communities.

5. Whom do you partner with to implement Bloom Network initiatives and improve the health of the MCH population?

We collaborate with over 40 partners, most located in Saint Louis City and St. Louis County. These partners include hospital systems, managed care organizations and community-based organizations working to improve MCH. We continue to expand our network, and the Home Visiting Program initiative has expanded to 19 other counties.

As an intermediary organization, we partner with organizations by funding MCH initiatives and offering free training on various topics, including motivational interviewing, trauma-informed care, safe sleep practices, perinatal mood and anxiety disorders, mental health first aid, canning kitchens, and cultural humility.

Additionally, we work and support our partners through collecting and sharing qualitative and quantitative data. Partners across all three Bloom Network Initiatives have collected data on various MCH indicators for many years. The Generate Health team analyzes and shares these data with our partners across the state. For example, we have shared the data with community members and collaborators such as Parents as Teachers and the Home Visiting Program at the Department of Elementary and Secondary Education.

6. What does the Bloom Network Initiative hope to accomplish within the next few years?

In the next 5–10 years, we hope to decrease health disparities by bringing together systems that operate through an equity and justice lens, acknowledging historical and contemporary injustices. We will continue using the robust data collected to strategically address MCH disparities among Black families.

Another goal is that Bloom Network Initiative will be a catalyst of change that helps families achieve autonomy in choosing members of their care team, from doulas to behavioral mental health practitioners to home visitors to community health workers to physicians. Overall, we hope to provide more support to Black families to improve health outcomes from pregnancy through a child's first 10 years of life.

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7. What are some ways the Bloom Network Initiative engages with families and/or communities?

The Bloom Network Initiative does not work with families directly. However, we work closely with the Flourish St. Louis team. FLOURISH St. Louis, which collaborates with Generate Health, is a collective impact initiative to make St. Louis a place where families flourish. The initiative is devoted to eliminating disparities in infant mortality by 2033. FLOURISH focuses on coordinated quality care, safe sleep, social determinants of health, and equity capacity building. The CLC consists of residents who bring their experiences living in St. Louis to help identify solutions to address the needs of Black families in the region. To learn more, visit the [FLOURISH webpage](#) or review the [2019 Annual Report](#).

Additionally, community voices are represented in the executive working groups and/or steering committees for the areas of work led by the Bloom Network Initiative. Two of the six members of the steering committee are community representatives. Similarly, in the PBHI, community voices are represented through the initiative's grassroots organizations. Therefore, no decisions are made without the input and perspective of the community voice.

Save the Date

AMCHP Policy & Partnerships Town Hall Series

Second Thursday of every month | Virtual | 1-2 p.m. CT

Join the Policy and Government Affairs Team at the Association of Maternal & Child Health Programs (AMCHP) to learn about the latest federal maternal and child health policy updates and hear from our national, federal, and state partners in the AMCHP Policy and Partnership Town Hall Series. Click each date to register for one or all of the scheduled Town Halls. To sign up, you can register [here](#).

2024 TRACTION Summer Conference

July 21-23, 2024 | In-Person | Columbia, MO | Stoney Creek Hotel, 2601 South Providence Road

Every year, the Missouri Department of Transportation partners with the Cape Girardeau Safe Communities to offer a transportation safety leadership training conference to all Missouri high schools. This conference is called TRACTION – Teens Taking Action to Prevent Traffic Crashes, and it is a spectacular opportunity for students and advisors alike! TRACTION is a 2.5-day youth traffic safety leadership training program to empower youth to actively promote safe driving habits and provide them with the motivation, information, skills, and support necessary to develop a plan of action addressing unsafe driving behaviors in their schools and communities. Schools may send up to 12 students (and two advisors) to work together to develop and implement an action plan for their local community in the year following the summer conference. Register [here](#).



MCH Previous Newsletters



NEWS OF NOTE

The Missouri Tobacco Quit Services

The number one cause of preventable death and disease in the United States is tobacco use. No matter where you are, you know the drastic effects that tobacco use can have on an individual. The Department of Health and Senior Services (DHSS) Tobacco Prevention and Control Program has contracted with the National Jewish Health to provide various new and exciting tobacco cessation services. The Missouri Tobacco Quit Services offers many specialized programs. One of the programs supports pregnant and postpartum women through coaching calls with a designated female coach throughout the participant's quit journey. This program will provide cash incentives for completed coaching calls; this incentive is not available to participants in the standard program. It is important to note that a participant must enroll in the program during the prenatal period and have at least one call during pregnancy. This means that participants cannot enroll in the Pregnancy and postpartum program after delivery.



Another program, **My Life My Quit**, is also available for teens ages 13-17. Teens can enroll through phone, web, or by texting "Start My Quit" to 36072. The My Quit website is a resource hub for downloadable promotional materials and resources for educators, providers, and parents.

The Missouri Tobacco Quit Services coaches are highly trained in cognitive behavioral therapy and experienced in helping patients live tobacco-free. Professional coaches have 240 hours of training and prior experience in counseling, and many may be former smokers. Individuals interested in enrolling in the Pregnancy and Postpartum Cessation Program will call 1-800-QUIT-NOW (784-8669) or visit YouCanQuit.org. After completing the enrollment questionnaire, participants will be referred to the Pregnancy and postpartum individualized program if they are eligible.

Local public health agencies (LPHAs), health care organizations, community-based organizations, and employers can refer individuals to the Missouri Tobacco Quit Services using the [online referral portal](#). A fax form can also be downloaded from the [DHSS webpage](#), completed and scanned to 1-800-261-6259. The Missouri Tobacco Quit Services staff will contact your referred individual within 24 hours. Pediatricians and youth-serving organizations are also encouraged to refer teens 13-17 to the My Life My Quit Program [here](#).

Contact Paul Snyder, Tobacco Cessation Specialist, at paul.snyder@health.mo.gov or call 573-522-0011 with any questions related to Missouri Tobacco Quit Services.

MISSOURI TOBACCO
QUIT SERVICES
1.800.QUIT.NOW (784.8669)



**Free, confidential help
to quit vaping, smoking,
or chewing for youth
under 18**

**Text "Start" to 36072
Call 855.891.9989
mylifemyquit.com**

CDC Calls for Urgent Action to Stop the Increase of Newborn Syphilis Cases

The Centers for Disease Control and Prevention (CDC) released a [new report](#) calling for urgent action to stop the increase in newborn syphilis cases. CDC data shows that in 2022, there was a significant surge in cases of congenital syphilis, with a disproportionate impact on marginalized communities. Several organizations, including the National Association of County and City Health Officials, have called for a coordinated, multisector response to the rise in cases and highlighted the need to prioritize rapid testing and treatment. Read the [press release](#).

FDA Recalls Applesauce Puree Pouches Due to Elevated Lead Levels

On Nov. 2, 2023, the Federal Drug Administration recalled WanaBana, Schnucks, and Weis's brand cinnamon applesauce pouches due to high lead levels. Even though nationwide efforts have removed the product from retail shelving, the product has a long shelf life and may still be found in homes.

Lead is toxic to humans. Children under six and pregnant women are the highest risk groups for severe lead poisoning illness. Most children do not show obvious immediate symptoms. However, short-term exposure to high concentrations of lead could cause symptoms such as headache, abdominal pain, vomiting, and anemia. Long-term exposure to high levels could result in irritability, fatigue, muscle aches, constipation, brain fog, tremors, weight loss, behavioral issues, and lowered IQ.

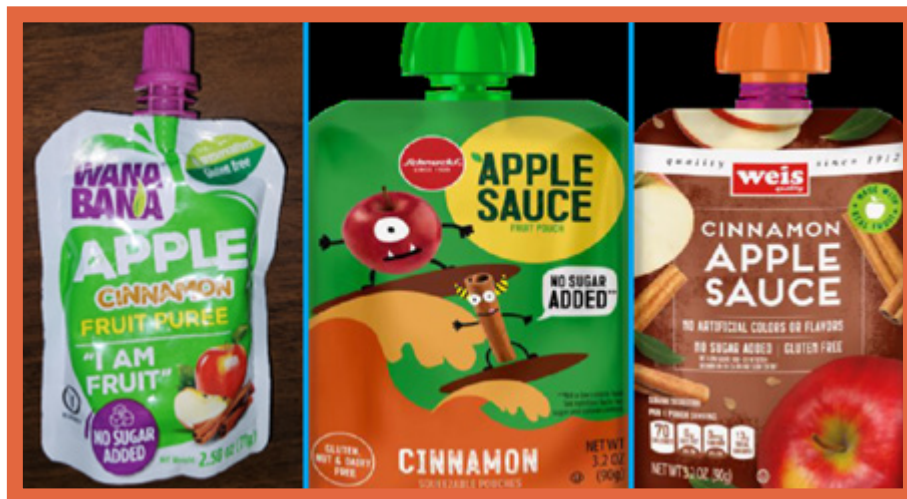
Immediate action items:

- Look for and dispose of the products by emptying the pouch into the trash can to prevent others from consuming it.
- If you or your children have ever consumed these products, call your physician or [LPHA](#) to discuss having your blood lead levels tested.

Recalled cinnamon apple puree and applesauce products:

Information on lot codes and UPCs can be found in the [firm's recall announcement](#).

- WanaBana apple cinnamon fruit puree pouches were sold nationally and are available through multiple retailers, including Amazon, Dollar Tree, and other online outlets.
- Schnucks-brand cinnamon-flavored applesauce pouches and variety packs were sold at Schnucks and Eatwell Markets grocery stores.
- Weis-brand cinnamon applesauce pouches were sold at Weis grocery stores.



Join Our MCH Stakeholder Contact List

If you are not already on the Missouri DHSS Maternal Child Health stakeholder contact list, we invite you to take a few minutes to complete the MCH stakeholder contact list survey.



The survey can be accessed [here](#).



MCH RESOURCES AND TOOLS

NICHQ Webinars

NICHQ webinars bring together content and quality improvement experts to provide insight, advice and resources on driving change in children's health outcomes. From sharing key project findings to addressing complex obstacles and opportunities, these webinars provide essential tools and knowledge for all those working to improve children's health systems. Use the quick links below to view webinars by topic.

- [Infant Health](#)
- [Early Childhood](#)
- [Sickle Cell Disease](#)
- [Quality Improvement](#)

Maternal Health Awareness Day Events and Resources

- [Webinar: The U.S. Department of Health and Human Services](#)
- [Webinar: The American College of Obstetricians and Gynecologists](#)
- [Webinar: Walgreens: Maternal Health Awareness Day Panel](#)
- [Blogpost: The HER Foundation](#)
- [Webpage: The Centers for Disease Control and Prevention: HEAR HER Campaign](#)

AMCHP: MCH Bridges Podcast

MCH Bridges is designed to help listeners create new connections to MCH leaders and organizations to inspire and guide listeners toward actions that will improve the systems that impact MCH populations. You can catch up on previous episodes of the Podcast [here](#).

Mental Health Hotlines

- Missouri 988 Suicide and Crisis Lifeline
- 1-833-9-HELP4MOMS-Maternal Mental Health Hotline



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES

Title V Maternal Child Health Block Grant
P.O. Box 570 • Jefferson City, MO 65102

[Health.Mo.Gov](https://www.health.mo.gov)

You received this message because you are identified as a maternal child health stakeholder. This newsletter is produced quarterly by the MCH/Title V team at the Department of Health and Senior Services. Email Nina.nganga@health.mo.gov to request inclusion of your event, resource or update in our eNewsletter.

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