Are you ready to embrace the principles of JEDI? The acronym “JEDI”, representing “justice, equity, diversity and inclusion”, has become a popular term for labeling initiatives focused on social justice issues. Although there may be differing opinions on the appropriateness of using the same name as the superheroic protagonists of the science fiction Star Wars franchise, the “Jedi”, hopefully we can all agree on the importance of intentionally and authentically integrating justice, equity, diversity, and inclusion principles into maternal and child health programs and initiatives. Just as there may be differing opinions on the acronym “JEDI”, there are many definitions for justice, equity, diversity and inclusion. The following definitions will provide the framework for our MCH programs and initiatives: social justice is addressing health disparities and promoting policies and programs that do not perpetuate health disparities based on race, ethnicity, religion, education, occupation, socioeconomic status, address, or any other demographic; health equity is when “All groups have access to the resources and opportunities necessary to eliminate opportunity and resource gaps, and thereby, improve the quality of their lives.” (https://amchp.org/equity-and-anti-racism/); diversity is recognizing that each individual is unique, respecting and valuing our different ways of being and knowing, and relating to those qualities and conditions that are different from our own and outside the groups to which we belong; and inclusion is making sure that all members of a population/community (for example, those with disabilities or special needs, minority groups, refugees, etc.) are intentionally represented and feel respected, valued and actively engaged. The MCH workforce and the population we serve are diverse, and the MCH population includes historically marginalized individuals and communities who suffer from a number of health care disparities, including lack of access to health care. It is imperative that we create an environment that is reflective and inclusive of that diverse workforce and community and embrace the principles of justice, equity, diversity and inclusion in our work.

The FFY 2021-2025 Title V MCH Block Grant State Action Plan includes the crosscutting state priority to address the Social Determinants of Health Inequities through training & the promotion of health literacy and the overarching principle to ensure access to care, including adequate insurance coverage, for the MCH population. The impacts of the COVID-19 pandemic exacerbated preexisting disparities and highlighted the importance of an integrated and holistic approach to justice, equity, diversity, and inclusion. In collaboration with the MCH Workforce Development Center and in alignment with the #HealthierMO Health Equity Design Team public health training modules currently in development, a core MCH training plan that is inclusive of the principles of justice, equity, diversity, and inclusion is being developed for implementation across all MCH programs and contracts supported by the Title V MCH Block Grant. The training plan components related to the principles of justice, equity, diversity, and inclusion is being developed for implementation across all MCH programs and contracts supported by the Title V MCH Block Grant. The training plan components related to the principles of justice, equity, diversity, and inclusion will be informed by the lessons learned and the continued evolution of these principles, and the training plan will be updated at least annually.

Martha J. Smith, MSN, RN
Missouri MCH/Title V Director
Leadership Announcements

DHSS is excited to share with you some leadership changes within the Department! The leadership changes are as follows:

Paula Nickelson - Acting Director, Department of Health and Senior Services
Laura Naught – Deputy Director, Department of Health and Senior Services
Mike Massman – Director, Missouri State Public Health Laboratory
Lori Brenneke – Director, Division of Community and Public Health
Melinda Laughlin – Deputy Director, Division of Community and Public Health
Eric Hueste – Administrator, Office of Emergency Coordination.

Congratulations to each of the individuals above on their new roles!

Program Highlights

SLU’s MCH Center for Excellence in Maternal and Child Health Education, Science and Practice (MCH CoE) Title V Spring Tour

As part of the Saint Louis University (SLU) MCH CoE Region VII Title V Spring Tour, the DHSS MCH/Title V team hosted graduate students and faculty for an in-person visit. The SLU faculty and students and DHSS MCH team members had the opportunity to network, learn about the SLU MCH CoE and various DHSS programs supported by the Title V MCH Block Grant, and brainstorm opportunities for collaboration. Opportunities to meaningfully collaborate to address social determinants of health and MCH disparities, and improve MCH outcomes was a core theme of the discussions.

Save the Date!

5th Annual Regional Conference on Adolescent Health
June 8-10
Kansas City Airport Hilton, Kansas City, MO

The 5th annual Regional Conference on Adolescent Mental Health will be held on June 8 - June 10th. The conference is designed for teachers, school nurses, prevention and care providers, administrators, health professionals, community health planners, physicians, counselors, and individuals from community-based organizations, members of the faith community, social workers, parents and public health individuals. Two hours of graduate credits through Baker University will be available on site at an additional cost. More conference information and registration details can be found here.

The first MCH newsletter was disseminated in December 2021! In case you missed it, you can read it here.
1. **What is the purpose of the MCH Services Program?**

The primary purpose of the MCH Services Program is to support a leadership role for local public health agencies (LPHAs) to build community-based systems and expand the resources those systems can use to respond to priority MCH issues.

a. **Whom do you partner with to implement MCH initiatives and improve the health of the MCH population?**

The MCH Services Program contracts with 111 LPHAs in Missouri; all LPHAs are encouraged to participate in the contract, however, each must assess their agency’s capacity (staff, resources, time, etc.) to respond to priority MCH needs and expand and enhance MCH activities and initiatives.

b. **What are the LPHAs currently working on to improve the health of the MCH population, and how is that determined?**

LPHAs participating in the MCH Services contract were required to conduct a focused local MCH needs assessment during the Federal Fiscal Year (FFY) 2021 contract year to determine the priority MCH needs to be addressed during the FFY 2022-2026 contract years. The LPHAs develop and implement a work plan using the Spectrum of Prevention framework, which identifies six levels of intervention ranging from strengthening individual knowledge and skills to influencing policy and legislation. The work plans identify system outcomes for each of the six levels of intervention, to be attained by the end of the five-year contract period.

For the FFY 2022-2026 work plans:

- 32 LPHAs are promoting protective factors for youths and families.
- 20 LPHAs are working to improve pre-conception, prenatal and postpartum health care services for women of childbearing age.
- Seven LPHAs are promoting safe sleep practices among newborns to reduce sleep-related infant deaths.
- 23 LPHAs are working to reduce obesity among children and adolescents.
- Seven LPHAs are working to enhance access to oral health care services for children.
- 23 LPHAs are working to reduce intentional and unintentional injuries among children and adolescents.
- One LPHA is working to ensure coordinated, comprehensive and ongoing health care services for children with and without special health care needs.
- One LPHA is working to address the social determinants of health inequalities.

c. **What is the role of the MCH District Nurse Consultant (DNC)? Where are they located?**

The role of the MCH DNC is to:

- Provide consultation to the LPHAs regarding MCH, public health and public health nursing resources, practice and planning.
- Provide technical assistance for the MCH Services contract and to support LPHA MCH work plan outcomes and successes.
- Assess local capacity to promote MCH.
- Promote the MCH 10 Essential Services.
- Develop educational resources and material on MCH issues.
- Participate in local, regional and statewide coalitions, collaboratives and workgroups.
- Facilitate state and regional MCH meetings to promote networking and performance improvement.
- Serve as a liaison for the MCH Services Program and Title V MCH Block Grant.

For the MCH Services Program, the LPHAs are organized into four regions: Northern, West Central, East/Southeast, and Southwest. One MCH DNC is located in each region.
2. Please share some highlights of the great work being done by the LPHAs:

- The Jefferson County Health Department developed 69 physical activity kits that can be checked out by youth and families to promote physical activity, which are available in all six Jefferson County libraries. They also placed 12 interactive signs, that include QR codes linking to physical and emotional wellness activities that can be done while using the parks and trails. In addition, they provided direct educational programs and services by working with 500 youth through physical activity events through before and after school programs. LPHA staff feel these youth now have a better understanding of healthy lifestyle components and how to achieve them.

- The Springfield-Greene County Health Department was instrumental in creating a Postpartum Support International (PSI) chapter in Missouri to support local moms and families with a postpartum support need. In addition, as a result of efforts to reduce tobacco use, the community passed an ordinance prohibiting the sale of tobacco to anyone under the age of 21, and an educational campaign regarding the effects of vaping was adopted into curriculum within the Springfield public schools. A social media campaign regarding vape prevention was successful in reaching the community through business ads, Facebook and Instagram. Community partners, including Pregnancy Care Center and Lifehouse, are providing smoking cessation education and tools to pregnant clients and families. The number of smoke-free rental properties has also increased.

- The McDonald County Health Department increased access to women's health screenings, education and birth control for uninsured residents. A clinic was established through the MCH contract, providing access to care for 114 women in 2021. These uninsured women would not otherwise have been able to afford or have transportation to the nearest free clinic over 40 miles away. The development of the clinic also brought together providers from the entire county to address issues facing uninsured women. This workgroup identified the need to ensure that all women receive yearly well-woman reminders.

- The Callaway County Health Department worked with providers to implement use of postpartum depression screenings in all clinics and adopted a policy at the health department to use the postpartum depression screening tool to screen all postpartum women.

- The Platte County Health Department worked with schools and community partners to become trauma informed.
  - Using the Signs of Suicide (SOS) Program, 8,412 Platte County 7th-12th graders were screened for suicide ideation in the Spring of 2021 and 27,651 7th-12th graders were screened in FFY 2019-2021 in Platte County public and private schools.
  - Policies are in place in all school districts requiring annual screening and ongoing evidence-based suicide prevention programming.
  - Staff in all public and private schools are trained to identify, respond and refer youth at risk for suicide/self-harm.

- The Dallas County Health Department implemented a mental wellness worksite policy and created a community mental wellness resource guide that was distributed in both hardcopy and digital format. They also worked with high schools to provide staff and classroom training opportunities related to suicide prevention, journaling and conversation prompts.

- The Butler County Health Department worked to increase the number of schools and child care facilities implementing healthy lifestyle classes that include substance abuse, nutrition and physical activity lessons. A wellness group was created to work on projects within the community as a whole, instead of relying on one entity.

- Mississippi County Health Department increased awareness of infant safe sleep practices and programs within Mississippi County by making community organizations, agencies and businesses aware of safe sleep messaging and programs that can assist with promoting safe sleep.

- Through partnership with the Missouri Extension Office, the New Madrid Health Department added a patient navigator staff position to help with referrals and assistance applications. Prenatal vitamins and folic acid are available free of charge to all women of childbearing age.

- The Webster County Health Department collaborated with the Webster County DMV to address reduction of motor vehicle accidents among youth. This intervention allowed for DMV policy change to provide educational materials and provided a point of discussion for families about safety as they celebrated their youth's new driving independence.

3. Please share a MCH Services Program Success Story:

In January 2022, the MCH Services Program hosted eight virtual MCH Networking Meetings, organized by priority health issue and with subject matter experts as speakers, for the LPHAs. Feedback from the LPHAs showed the resources shared and the networking that occurred were very valuable in moving MCH initiatives forward.
Statewide MCH Navigator Pilot

The Title V MCH Block Grant is contracting with ParentLink to implement a pilot statewide MCH Navigator program to promote and improve the health and well-being of Missouri’s mothers, infants and children, including children with special health care needs, and their families by connecting parents, caregivers and families with needed resources. The initiative will support: 1) access to quality health care for mothers and children, especially for people with low income and/or limited availability to care, 2) health promotion efforts that seek to reduce infant mortality and the incidence of preventable diseases, 3) increasing the number of children appropriately immunized against disease, 4) access to comprehensive prenatal and postnatal care for women, especially low-income and/or at-risk pregnant women, 5) increasing health assessments and follow-up diagnostic and treatment services, especially for low-income children, 6) access to preventive and child care services as well as rehabilitative services for children in need of specialized medical services and 7) increasing family-centered, community-based systems of coordinated care for children with special health care needs.

COVID-19 Among MCH Populations

While COVID-19 vaccination in pregnancy has been strongly recommended for some time, vaccination coverage among pregnant people remains staggeringly low. Nationally, 68% of pregnant women ages 18-44 years are fully vaccinated. In Missouri, 52.7% of women of reproductive age (18-44 years) have been fully vaccinated. While 34.3% of people ages 5-17 years have initiated vaccination, only 29.6% have been fully vaccinated. A recent Morbidity and Mortality Weekly Report stated that during the period of increased circulation of the Omicron variant, COVID-19–associated hospitalization rates among children and adolescents aged 0–17 years increased rapidly in late December 2021, especially among children aged 0–4 years who are not yet eligible for vaccination. Throughout the periods of Delta and Omicron predominance, hospitalization rates remained lower among fully vaccinated adolescents aged 12–17 years than among unvaccinated adolescents. Important strategies to prevent COVID-19 among infants and young children include vaccination of currently eligible populations such as pregnant women, family members, and caregivers of infants and young children. For resources and tools on COVID-19 vaccination for MCH resources, see the MCH resources and tools section on page 6.

MCH Multisector Action Network

To address maternal substance use and mental health issues, the Title V MCH Block Grant is contracting with the University of Missouri Kansas City-Institute of Human Development to leverage existing maternal-fetal-infant (MFI) workgroups and organize, convene and facilitate a statewide MCH Multisector Action Network. The beginning focus of the Network will be to promote a coordinated, multidisciplinary system of care for women of childbearing age and pregnant and parenting mothers, which ensures health equity, racial and social justice and a comprehensive continuum of care, including prevention and treatment efforts, for women and mothers with mental health and substance use disorders (SUD).

Perinatal Cannabis Consumption

According to the Substance Abuse and Mental Health Services Administration (SAMHSA), approximately one in 20 people report using cannabis while pregnant—making it the most used federally illicit substance by pregnant people in the U.S., Missouri is one of 39 states to have a legal medical marijuana program. In the era of accelerated cannabis legalization across the country, AMCHP has published an issue brief on perinatal cannabis use and key considerations for state MCH programs. The report provides background information on cannabis use among MCH populations and features state-based program and policy approaches that MCH programs can adopt to address this growing threat to the health of pregnant and postpartum women and their families.

Missouri Opioid Overdose Deaths

Opioid overdose deaths among Missourians reached an all-time high in 2021. 1,511 Missourians died of an opioid overdose in 2021, compared to 1,375 in 2020. Of these deaths, 444 were women above the age of 18. Nationally, more than 100,000 people died of overdoses between April 2020 and April 2021, and nearly 23,000 women died of an overdose in 2019. Harm reduction is a critical strategy for overdose prevention and is more necessary than ever as overdose deaths continue to rise. The AMCHP-National Association of State and Alcohol Drug Abuse Directors (NASADAD) project features an interactive collection of 10 state case studies that highlight successful collaborations between state MCH programs and alcohol and drug abuse agencies and identifies best practices for evidence-based harm reduction at the state and local level. By advocating for women-centered harm reduction practices, state MCH programs can provide leadership in improving outcomes for women who use substances and their families.
Black Maternal Health Week

The Black Mamas Matter Alliance (BMMA) 5th annual national Black Maternal Health Week (BMHW22) campaign took place on April 11-17. BMHW is a week of awareness, activism and community building to amplify the voices of Black Mamas and center the values and traditions of the reproductive and birth justice movements. Below are conversations held by BMMA, the National Birth Equity Collaborative (NBEC) and the U.S. Department of Health and Human Services from BMHW22.

- Honoring Black Maternal Health Week: A Discussion of Challenges and Opportunities
- This Woman’s Work: The Role of Black Fathers in Achieving Birth Equity
- HHS Secretary Xavier Becerra and State Leaders Discuss Black Maternal Health Week
- The Southeast Regional Black Maternal Health Symposium
- Policy Leaders in Conversation During #BMHW22, ft. VP Kamala Harris
- TECHnically Speaking

COVID-19 Resources

- MMWR: Hospitalization of Infants and Children Aged 0–4 Years with Laboratory-Confirmed COVID-19 — COVID-NET, 14 States, March 2020–February 2022
- Webinar: One Vax Two Lives: Addressing COVID-19 Misinformation
- Podcast: All the latest on COVID-19 and Fertility, Pregnancy and Breastfeeding

AMCHP Podcast

- The Association of Maternal and Child Health Programs (AMCHP) has a podcast known as MCH Bridges which aims to inspire and guide actions that will improve the systems that impact MCH populations. MCH Bridges aims to lift up stories and people from the MCH field by centering the voices of the public health workforce, people and communities most impacted by inequities, and individuals and families with lived experiences. Listen to the podcast here.

Health Communication Resources

- AMCHP hosted a series of social media trainings for MCH professionals in March. You can view these trainings on YouTube. Session 1: Platforms for a Purpose and Session 2: Campaigns that Count.
- Public health communicators can play a vital role in saving lives and keeping people healthy by focusing on the most important and factual information available. The Public Health Communications Collaborative has created downloadable social media infographics and other messaging resources designed to help public health leaders deliver fact-based, effective and timely communications.