



October 26-28, 2020

Maternal & Infant Health in the Digital World:

Patient-Centered Care During COVID and Beyond

VIRTUAL CONFERENCE

hmhbga.org/event/beyondcovid2020

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Restoring Our
Own Through
Transformation



Centering Community Voices: The Safer Childbirth Cities Initiative

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Disclosures

The projects being discussed today are supported by Merck & Co., Inc., Kenilworth, N.J., USA, through Merck for Mothers, the Burke Foundation, The Nicholson Foundation, the Community Health Acceleration Partnership, the W. K. Kellogg Foundation, Rhia Ventures, and others as part of the Safer Childbirth Cities initiative. Co-funders in the Safer Childbirth Cities initiative work together to fund activities to reduce maternal mortality, improve health outcomes, and narrow disparities in maternal health in cities across the U.S.

Learning Objectives

- ▶ Describe how structural inequities in urban settings and interpersonal, structural, and institutional racism produce racial disparities in maternal mortality and morbidity
- ▶ Demonstrate the importance of community leadership and engagement in equity-centered programs and initiatives to improve maternal health implemented in an urban setting, through three models
- ▶ Consider opportunities to communicate, spread, and scale the successes of community-led initiatives, especially those by Black-woman led organizations, to other urban settings and to the state and national levels

The Safer Childbirth Cities Initiative

- ▶ 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
- ▶ Currently reviewing proposals for a second cohort, which will be announced later this year
- ▶ 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

The Safer Childbirth Cities: First Cohort

The 10 cities who make up the first cohort of grantees are:

- ▶ **Atlanta, GA** - Black Mamas Matter Alliance
- ▶ **Baltimore, MD** - Baltimore Healthy Start
- ▶ **Camden, NJ** - Camden Coalition of Healthcare Providers
- ▶ **Chicago, IL** - AllianceChicago
- ▶ **Columbus, OH** - Reaching Our Own Through Transformation
- ▶ **Jackson, MS** - Mississippi Public Health Institute
- ▶ **Newark, NJ** - Greater Newark Healthcare Coalition
- ▶ **New Orleans, LA** - Institute for Women & Ethnic studies
- ▶ **Philadelphia, PA** - Healthcare Federation of Philadelphia
- ▶ **Pittsburgh, PA** - Jewish Healthcare Foundation

Today 3 cities will share tidbits of their work and experience navigating COVID-19



GREATER NEWARK HEALTH CARE COALITION

Nicole Cushman, MPH
Project Manager
Safer Childbirth Cities Initiative



Organizational Mission/Vision/Core Functions



Vision: Health equity for residents of Greater Newark

Mission: To work collaboratively to improve systems and community and individual conditions for optimal health and well-being.

Core functions:

Act as a neutral
convener of multi-sector
partners

Facilitate data sharing and
interoperability of data

Test innovative
strategies

Inform healthcare policy
and advocacy

COVID Response

1. New mom kits
2. Community engagement
3. Community Health Worker support for contact tracing
4. Deploy NowPow technology platform
5. Prioritize related health concerns

New Mom Kits

- Funded by the NJ Pandemic Relief Fund to support transition to telehealth
- 1,000 kits for women delivering at three labor & delivery hospitals
- Kits contain:
 - Blood pressure monitor
 - Thermometer
 - Cloth face mask
 - Educational Materials







Customized Educational Materials

Adapted content for health literacy & cultural competency

Commissioned original artwork to ensure representation

Checking Your Baby's Diapers

Here is how to tell if your baby is getting enough milk:

- 6+**  Your baby has 6 or more wet diapers every day during the first few days after they are born.
-  Your baby's poop is green at first, then turns yellow.
- 3+**  Your baby poops 3 or more times every day, during or after eating.
-  After one month, your baby will poop less. If the baby's poop is soft and they are feeding and acting well, then this is normal.

Source: American Academy of Pediatrics
Created by the Greater Newark Health Care Coalition

Taking Your Temperature

If you are feeling sick, you can check your temperature with a thermometer to find out if you have a fever.

Wash your hands and the tip of the thermometer with soap and water.



Don't eat or drink for 5 minutes before taking your temperature.



Place the tip of the thermometer under your tongue.



Hold the thermometer in place until you hear a beep or signal.

Remove the thermometer.



Read and write down the temperature.



Clean the thermometer with soap and water or rubbing alcohol.

If your temperature is 100.4 °F (38°C) or higher, call your doctor.

Created by the Greater Newark Health Care Coalition

Visit NewarkMom.org to download in English & Spanish!

“Having this kit make me feel more calm. I can take my blood pressure and know that I'm OK.”

—University Hospital patient





INSTITUTE OF
**WOMEN &
ETHNIC**
STUDIES



irthmark doula
collective

New Orleans Respectful Motherhood Initiative



Goals

- Use a mixed methods approach to define critical gaps and granular signals of risk associated with SMM and maternal mortality in New Orleans, with a focus on participatory methodology
- Co-design a New Orleans Perinatal Community Health Worker Program
- Conduct training and facilitate measurable changes to build the capacity of birthing hospitals to achieve birth equity, value and respectful care
- Ensure policy-level protection for women working in New Orleans' top industries that address health related social needs, place-based inequities, and barriers to safer childbirth

Impact of COVID/ Racism

- Lack of access to birthing families for qualitative research
- Organizational restructuring due to pandemic caused delays in implementation
- Limited access to key partners such local health department, hospitals, hospitality, unions
 - Dismantling
 - Priority shift
- Tabling of key MCH Legislation
- Lack of access to hospital facilities
- Increased demand of direct services virtual and in person
 - Homebirths, lactation, postpartum, prenatal care, linkages to care
- Access to PPE
- Shifting to telehealth
- Increased demand for community based maternal mental health

Our Response

- Prioritization of needs of families and connecting
 - Tabling advocacy work and long term planning objectives
- Fundraising for PPE, free homebirths, hot spots
- Changing organization structure to meet needs of community
- Utilize time to strategize for more coordinated and comprehensive bills
- Leveraging relationships to meet needs of families for better coordination in the future
- Improved receptivity of birth equity policy and publication
- Ensuring perinatal outcomes and black women are in the forefront during the COVID pandemic



What the Future Holds

- Improved collaboration opportunities
- Larger and more robust New Orleans Momnibus
- Identified where coordination could be strengthened across partnerships collaboration
- Re-organizing the context of the work in light of new normal
- Utilizing COVID/racial injustices lessons to move MCH agenda forward

BDC

Visit birthmarkdoulas.com/

Twitter - **@birthmarkdoulas**

Facebook –

Birthmark Doula Collective

Instagram -

@birthmarkdoulas

IWES

Visit iwesnola.org

Twitter - **@IWES_NOLA**

Facebook –

**Institute of Women & Ethnic
Studies**

Instagram - **@iwes_nola**

NBEC

Visit birthequity.org

Twitter - **@birthequity**

Facebook –

National Birth Equity

Collaborative

Instagram - **@birthequity**





2020 CONFERENCE

MATERNAL & INFANT
HEALTH IN THE DIGITAL WORLD:
Patient-Centered Care During
COVID-19 & Beyond

JESSICA M. ROACH, MPH
Chief Executive Officer & Partner

DORIAN L. WINGARD, MPA
Chief Operations Officer & Partner

ROOTT ORGANIZATIONAL OVERVIEW

Restoring Our Own Through Transformation (ROOTT) is a collective of concerned Black families, community members, advocates & interdisciplinary professionals dedicated to decreasing Black maternal & infant mortality in Ohio.

ROOTT's mission is to comprehensively restore our collective well-being through collaboration, resource allocation, research & re-empowerment, in order to meet the needs of Black parents & families.



ROOTT IMPACT STATEMENT

ROOTT provides direct services, public policy advocacy & education, in alliance with local & national stakeholders.

ROOTT goes beyond surface level risk factors regarding marginalized Black mothers, fathers, infants, & communities to address root causes of these health inequities.

ROOTT addresses Structural/Institutional Determinants of Health by targeting the racism that creates & sustains the Social Determinants of Health.

ROOTT collaboratively builds quality relationships with families, caregivers, professionals & paraprofessionals aligned with our mission.



SENIOR LEADERSHIP TEAM

Jessica M. Roach, MPH
CEO & Partner

Dorian L. Wingard, MPA
COO & Partner

DESTINY DANIELS
Intake Coordinator

MONIQUE MCCRYSTAL, BA
Co-founder & Clinical Supervisor

LAUREL GOURRIER, M.ED
HV Coordinator

DANIELLE H. JACKSON, BA
Executive Assistant



SNAPSHOT OF COLLABORATIVE PARTNERS

Safer Childbirth Cities



Merck for mothers
Committed to Saving Lives

Ohio | Department of
Job and Family Services



Ohio | Department
of Health



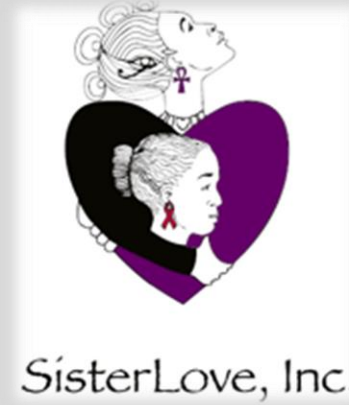
Commonsense Childbirth
National Perinatal Task Force



Ohio
Department of Medicaid



SNAPSHOT OF COLLABORATIVE PARTNERS

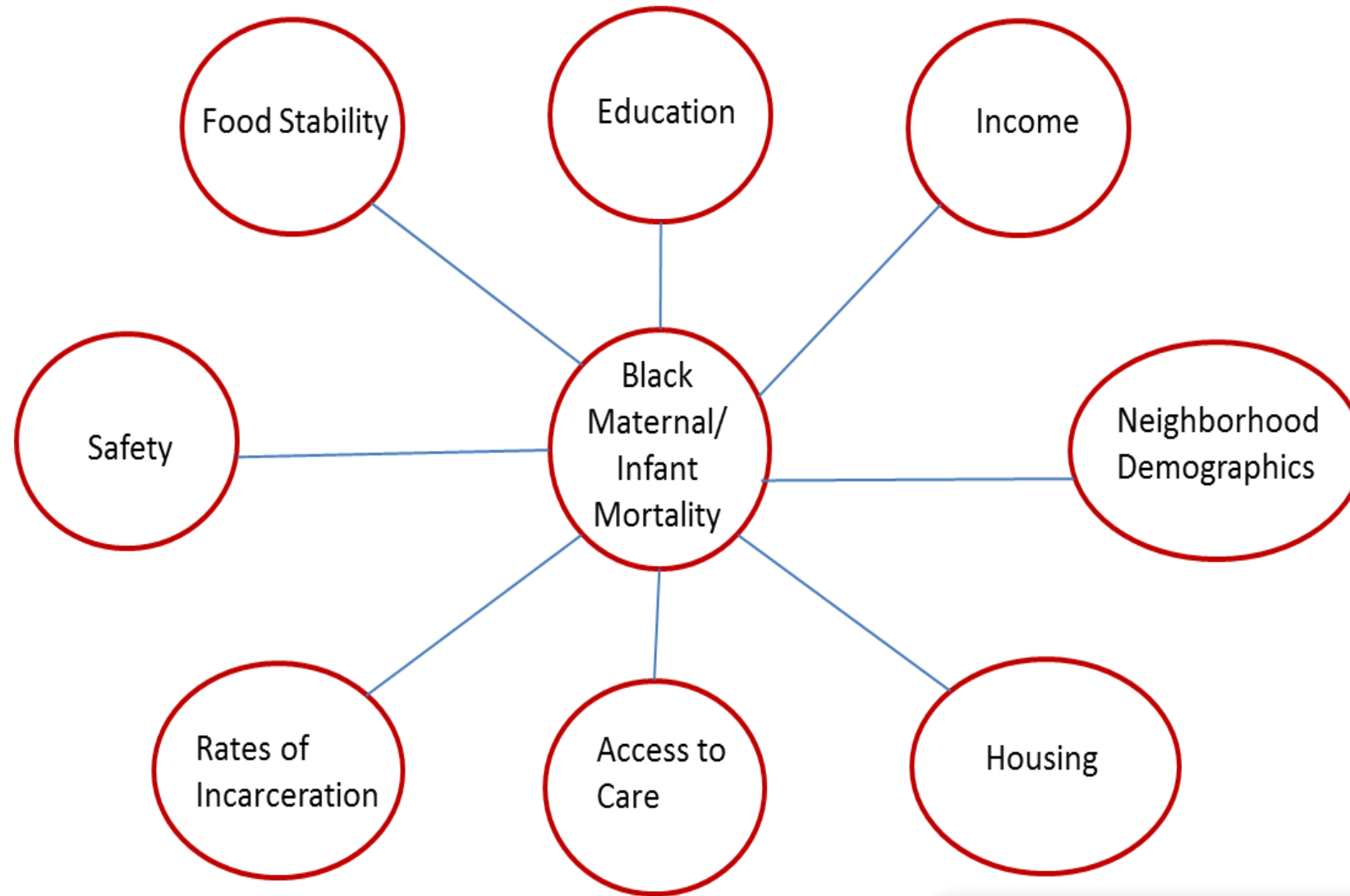


SNAPSHOT OF COLLABORATIVE PARTNERS



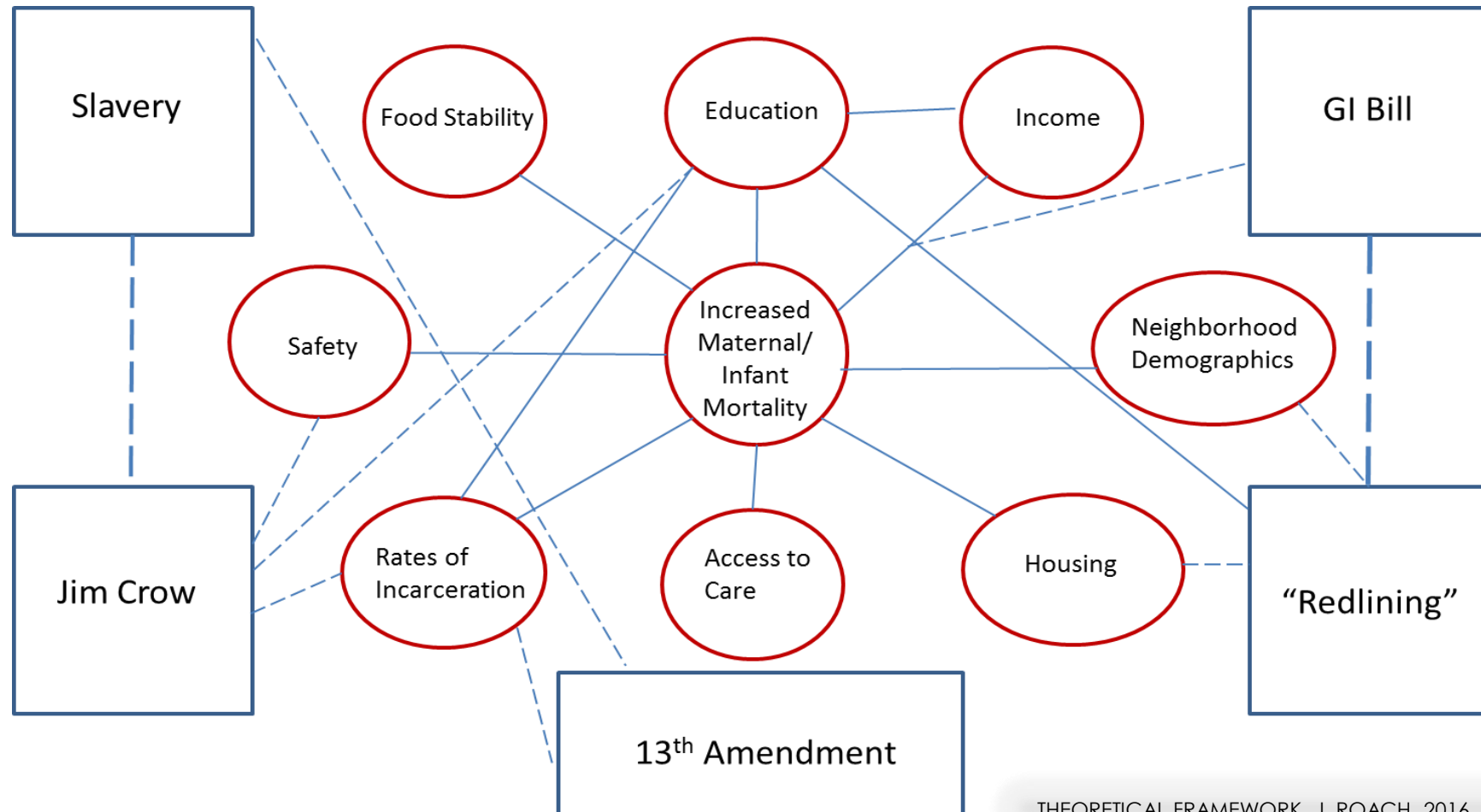


WEB OF CAUSATION SOCIAL DETERMINANTS



WEB OF CAUSATION

THE IMPACT OF STRUCTURAL DETERMINANTS ON HEALTH



Without addressing, **disrupting**, and **dismantling** the structural and institutional determinants, we **will not** be able to address social determinants.



ROOTT: A COMMUNITY BASED ORGANIZATION

Full Spectrum Perinatal Support Doulas
(Training & Certification)

Healthcare Provider Training & Continuing Education

CBO Consultation

SMEs & Policy Advocacy (Federal/State/Local)

Public Health Research (Independent & Institutional)

Social Injustice & Health Equity Activism



ROOTT FS-PERINATAL SUPPORT DOULAS



- Full Spectrum Perinatal Support
- Breastfeeding Education & Lactation Support (CLC)
- Health Information & Equity Advocate
- Family-centered Informed Decision Support
- Home Visiting Program Provider



Abbreviated Highlights & Accomplishments

2017

Established as a NP w/
501 (c)3 designation

ROOTT Advisory Council
formed

Became kindred partner
of BMMA

Inaugural Core PSD
training class

2018

ROOTT's first family supported
birth

ROOTT's first national publication

ROOTT established central office

ROOTT's first major grant

ROOTT's first external training of
CHWs

2019

ROOTT initiated its HV Program via
ODH contract

ROOTT's appointment to several
national boards & taskforces

ROOTT expanded national training
activity (UCSF, Kaiser Permanente,
etc.)

ROOTT increased family client
base exponentially

ROOTT awarded funding via ODM,
GOFBI

**ROOTT awarded MERCK Safer
Childbirth Cities grant**



COVID - 19 Protocol & Impact

PROTOCOL

- All client family engagements are virtual.
- All staff equipped pandemic training & PPE.
- SLT case reviews occur 3x/weekly.
- Assisted home-birth support is being provided.
- Client families are being provided w/ basic resources & home monitoring equipment.
- Virtual labor & delivery support is being provided.

IMPACT (ADVERSE)

- Increased requests for home-birth (assisted/unassisted).
- Increases in erroneous health information.
- Increases in premature scheduled inductions
- Increases in forced/coerced surgical births.
- Decreases in positive client family/PCP-Hospital experiences.
- Adverse birth outcomes.



“At some point, we must acknowledge and address how the foundation of Obstetrics and Gynecology as we know it in the U.S., was built from the stolen knowledge and traditions of Black and Indigenous Women...and used against us through means of rape, sexual assault, pedophilia, eugenics, and genocide. Reproductive Justice is the definition by which we say, WE are taking this back.”

Jessica M. Roach, MPH

”Race neutral solutions are impotent in the address of intentional, race-specific racism. Consequently, true health equity will certainly change the lives of the oppressed and the oppressor, in ways that may lead to the deconstruction of American inhumanity.”

DL Wingard, MPA



This is how
we ROOTT!!

www.roottrj.org



ROOTT Origin Story
NPR Story Corp, 8-2019



The background features abstract, overlapping geometric shapes in various shades of green, primarily on the left and right sides, leaving a large white central area. The shapes include triangles and polygons, some with thin white outlines.

Q&A

Contact Us

To learn more about the Safer Childbirth Cities Initiative:

<https://www.merckformothers.com/SaferChildbirthCities/>

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