

NEXT STEPS TO SUPPORT

KITSAP MATERNAL AND INFANT HEALTH

On July 20, 2023, Kitsap Public Health District, in partnership with Kitsap County and Virginia Mason Franciscan Health, hosted the Kitsap Maternal and Infant Health Forum at the Marvin Williams Recreation Center in Bremerton. The goal of the forum was to foster collaboration, inspire knowledge exchange, and most importantly, share innovative solutions for protecting and improving the health of people who give birth and their infants in Kitsap County.

This document outlines Kitsap Public Health's plan to address many of the recommendations highlighted by the forum and is guided by the Health Impact Pyramid and the Washington State Maternal Mortality Review Panel Report. It guides actions we are exploring for potential implementation, includes examples of interventions that have been effective in other communities, and is a dynamic document that will be updated over time. Kitsap Public Health is working with community partners in this endeavor and we invite others interested in this work to join us.

KPHD OBJECTIVES

Below is a summary of key objectives Kitsap Public Health will implement, facilitate, or advocate for in response to the Kitsap Maternal and Infant Health Forum. Objectives and supporting activities are described in detail, starting on page 3.

Objective 1: Increase and improve maternal and infant health services impacting populations with the highest health disparities in Kitsap County.

- **Action A:** Facilitate the development and implementation of a Black maternal and infant health program.
- **Action B:** Explore partnering with the Suquamish Tribe on services for pregnant/parenting individuals and their infants.
- **Action C:** Participate in the development of a 2024 Kitsap mental health forum.

Objective 2: Improve service navigation for pregnant and parenting families and increase access to home visiting programs.

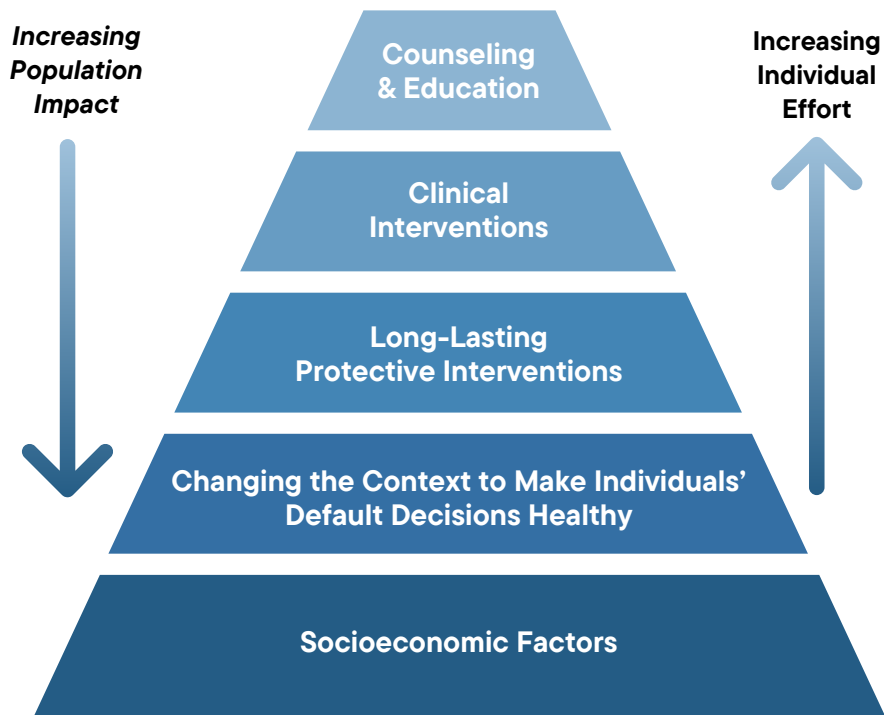
- **Action A:** Champion Virginia Mason Franciscan Health (VMFH) to consider creation of a "Postpartum Wellness and Recovery Program" (PWR) and universal nurse newborn home visiting program like "Welcome Home Baby" in Kitsap.
- **Action B:** Implement a centralized referral system to link families to the services best suited to meet their needs.
- **Action C:** Convene perinatal care providers to build awareness of existing local resources and foster collaboration in providing services for pregnant and postpartum persons.

Objective 3: Improve funding and resources that address maternal and infant health needs in Kitsap County.

- **Action A:** Explore feasibility of establishing sustainable funding to promote healthy child development – some examples include King County's "Best Starts for Kids" model, Whatcom County's initiative that created the "Healthy Children's Fund," and the creation of a public hospital district.
- **Action B:** Advocate for health care funding and policies at the state level that expand coverage to holistically support optimal maternal and infant health with wrap around support services.
- **Action C:** Foster the development of a robust and diverse maternal and infant health workforce.

APPROACHES TO IMPROVING HEALTH

The Health Impact Pyramid



A **five-tier pyramid** best describes the impact of different types of public health interventions and provides a framework to improve health.

At the base of the pyramid are interventions that have the greatest potential to improve outcomes for entire populations, starting with efforts to improve socioeconomic factors. Higher in the pyramid are interventions that directly benefit individuals while requiring greater individual effort.

Interventions focusing on the lower levels of the pyramid tend to be more effective because they reach broader segments of society and require less individual effort. Implementing interventions at each level can achieve the maximum possible sustained public health benefit.

Source: ncbi.nlm.nih.gov/pmc/articles/PMC2836340

Washington State Maternal Mortality Review Panel Priority Areas for Change

- **Undo racism and bias:** Address racism, discrimination, bias, and stigma in perinatal care.
- **Address mental health and substance use disorder:** Increase access to mental health and substance use disorder prevention, screening, and treatment for pregnant and parenting people.
- **Enhance health care quality and access:** Expand equitable and high-quality healthcare by improving care integration, expanding telehealth services, and increasing reimbursement.
- **Strengthen clinical care:** Build on the quality and availability of perinatal clinical and emergency care that is comprehensive, coordinated, culturally appropriate, and adequately staffed.
- **Meet basic human needs:** Identify and secure the necessities of pregnant and parenting people by prioritizing access to housing, nutrition, income, transportation, childcare, care navigation, and culturally relevant support services.
- **Address and prevent violence:** Put a stop to violence in the perinatal period through survivor-centered and culturally appropriate coordinated services.



Source:

doh.wa.gov/sites/default/files/2023-02/141-070-MaternalMortalityReviewPanelReport-2023.pdf

KPHD OBJECTIVES

Objective 1: Increase and improve maternal and infant health services impacting populations with the highest health disparities in Kitsap County

ACTION A: Facilitate the development and implementation of a Black maternal and infant health program.

The Black maternal and infant health program is an initiative aimed at addressing the pressing disparities in maternal and infant healthcare within Kitsap County. The need for such a program is underlined by concerning national, state, and local trends. For example, from 2017 to 2021, Black and African American people giving birth had higher rates of premature birth (11% compared to 7% of white people giving birth) and babies born with at a low birth weight (9% compared to 4% of white people giving birth). From 2012 to 2021, Black or African American infants in Kitsap have had a slightly higher, though not statistically significantly higher, mortality rate (10 deaths per 1,000 live births) compared to white infants (4 per 1,000).

A Black maternal and infant health program will help address these urgent issues and ensure the wellbeing of people who give birth and infants in the county. This initiative will explore using elements of these models:

- **Black Infant Health Program** model ([Tacoma-Pierce County Health Department](#)) and **Healthy Birth Initiatives Program** model ([Multnomah County, Oregon](#))
 - Supports Black families before and after the birth of a child
- **Pop-up village model** ([University of California San Francisco](#))
 - Wrap-around services from community and governmental organizations in one spot
- **Human-centered design** model ([IDEO](#))
 - Promotes meaningful participation of individuals in framing challenges they experience and developing solutions.

“Communities who experience disparate outcomes have the expertise and cultural knowledge to influence improving of care and experience and we want to invest (in) what their decisions are.”

- Katie Eilers, WA State Department of Health

ACTION B: Explore partnering with the Suquamish Tribe on services for pregnant/parenting tribal members and their infants.

In response to interest from the Suquamish Tribe, Kitsap Public Health has been sharing information and resources to support the health of pregnant and parenting tribal members and their infants.

This collaboration holds the promise of bridging healthcare gaps and nurturing the wellbeing of people who give birth and infants in a way that honors the heritage of the Suquamish people. These efforts are crucial as only 52% of pregnant people [in Kitsap](#), including American Indian/Alaska Native people, received adequate prenatal care from 2016 to 2021.

ACTION C: Participate in the development of a 2024 Kitsap mental health forum.

Kitsap Public Health will participate in the planning of a 2024 mental health forum and ensure that **maternal mental health is a priority** addressed by participants. The 2023 Washington State Maternal Mortality Review Report (WA MMRR) found that the leading underlying causes of pregnancy-related deaths were behavioral health conditions, including mental health conditions and substance use disorder. The WA MMRR report finds, “Among the 135 cases reviewed since the last report, the panel found from 2014 to 2020, 32 deaths were due to behavioral health conditions.” This further supports the recommendation in the WA MMRR to, “Increase access to mental health and substance use disorder prevention, screening, and treatment for pregnant and parenting people.”

Participants at this forum will be provided with information on evidence-based interventions to promote maternal mental health and be encouraged to identify actions to improve access to maternal mental health care in Kitsap County.

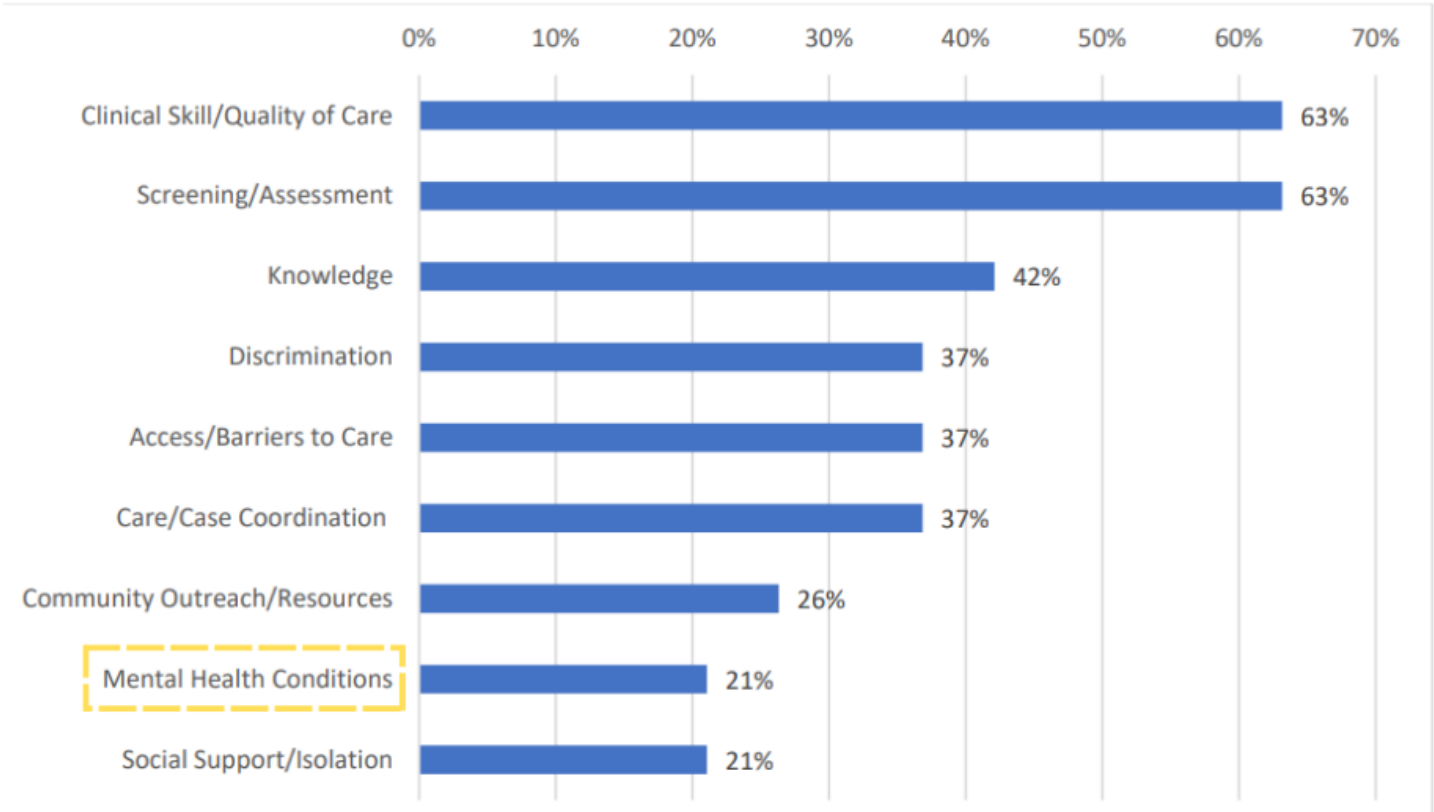


Figure 20, titled “Percentage of Preventable Pregnancy-Related Deaths from Behavioral Health Conditions Impacted by Type of Contributing Factor (Top Nine),” from the Washington State Maternal Mortality Review Panel report (2023). (Yellow box added to highlight the impact on maternal mental health.)

Objective 2: Improve service navigation for pregnant and parenting families and increase access to home visiting programs in Kitsap County

In 2021, Kitsap had only eight OB/GYN providers per 100,000 population, which was almost 47% fewer compared to Washington state overall (15 per 100,000 residents). Only one out of two Kitsap residents (52%) who gave birth in 2021 received adequate prenatal care. More than one in 10 (12%) of people who gave birth in Kitsap in 2021 were diagnosed with gestational hypertension during their pregnancy. In a 2022 community survey, more than half of respondents (54%) who were pregnant or had recently been pregnant said there was a time in the last two years when they needed lactation (breastfeeding or chestfeeding) support and could not get it. The actions below are designed to address these distressing realities and are intended to achieve this objective.

Action A: Champion Virginia Mason Franciscan Health (VMFH) to consider creation of a “Postpartum Wellness and Recovery Program” (PWR) and universal nurse newborn home visiting program like “Welcome Home Baby” in Kitsap.

- The **Postpartum Wellness and Recovery program (PWR)** aims to support parents of newborns with a specific focus on hypertensive disorders in pregnancy, perinatal mood and anxiety disorders, and gestational diabetes. The program hopes that by supporting individuals in the months following birth, we can decrease maternal morbidity and mortality, improve health outcomes, and increase healthcare equity. This program is being developed by Leizl Sapico, MD, FACOG, MA-ORGL, PMH-C, a VMFH physician. She presented at the Tacoma-Pierce County Perinatal Collaborative in 2023 and stated it is her dream to have this program in every CommonSpirit hospital.



The 2023 Kitsap Maternal & Infant Health Forum drew together local health professionals and community members.

- According to the 2007 Kitsap Public Health Community Health Annual Report, the **“Welcome Home Baby” program** offered a public health nurse visit to all Kitsap County postpartum persons within one to two weeks of delivery.
 - The program completed 675 home visits in 2007 offering education regarding injury prevention, newborn care, lactation assistance, self-care, signs and symptoms of postpartum depression, and the availability of support groups community resources.
 - It instituted a follow-up call routine (five to seven weeks after delivery) to assess parents' use of community resources, including having a certified car seat check, and to screen for postpartum depression. If the screen was positive, the mother was referred to a behavioral health specialist for further screening and referral if needed. Universal newborn home visiting as offered by the “Welcome Home Baby” program is supported by the outcomes of the “Family Connects” evidence-based model that provides universal home visiting. Key outcomes of that evidence-based program include:
 - Mothers were 28% less likely to report possible clinical anxiety.
 - Mothers reported more positive parenting behaviors and were more responsive to their baby at 6 months.
 - Mothers were more likely to complete their 6-week postpartum health checks.

Action B: Implement a centralized referral system to link families to services suited to meet their unique needs.

Kitsap Public Health will explore the development of a **centralized referral program** in Kitsap County and hire a navigator who connects families to resources specific to meeting their unique needs. The navigator will be knowledgeable about community resources, eligibility requirements, and be able to connect families to the home visiting program or early intervention program that offers the best support for them and their children. A centralized referral program would be a hub to provide a warm handoff to the resources listed below which are currently available in Kitsap County.

The following unique programs serve Kitsap parents and children in the pregnancy to age five category, each with differing goals and eligibility requirements:

- **First Steps Maternity Support Services (MSS)** serves any pregnant or postpartum person on Medicaid/ Apple Health until 2 months postpartum through home visiting or televisits.
- **First Steps Infant Case Management (ICM)** serves infants with higher needs/ risks until their first birthday through home visiting or televisits.

- **The Parent Child Assistance Program (PCAP)** serves mothers in recovery from substance use disorders for three years with home visitation, support, and transportation.
- **Kitsap Public Health's Nurse Family Partnership Program (NFP)** serves low-income, first-time pregnant individuals enrolled before 29 weeks gestation with nurse home visits and televisits.
- **Early Head Start (EHS) and Head Start (HS)** offers home visiting and center-based services to children and families who are low income, tribal, in foster care or kinship care, qualify for special education services, or are experiencing homelessness through the Olympic Educational Serve District (OESD), Kitsap Community Resources (KCR), and the Port Gamble S'Klallam and Suquamish Tribes.
- **Parents As Teachers (PAT)** home visiting is also offered by the Suquamish Tribe.
- **Navy New Parent Support** provides home visits to expectant active-duty military personnel, their spouses, and those families with children under the age of four.

There are multiple other resources available to families including services for children with special health care needs and early intervention services, WIC (Women, Infants, and Children) nutrition support, childcare, mental health services, support groups, domestic violence support, lactation supports, and many others.

New parents may be unaware of needed services, eligibility requirements, or how to enroll in the programs they choose.

Action C: Convene perinatal care providers to build awareness of existing local resources and foster collaboration in providing services for pregnant and postpartum persons.

Invited perinatal care providers include:

- Midwives
- Doulas
- Primary care providers (Family Practice, Pediatrics, etc.)
- Nurses (hospital, school, clinic, public health etc.)
- Olympic College Nursing Program faculty
- Lactation consultants
- OB/GYNs
- Mental and behavioral health specialists

Additionally, Kitsap Public Health will look into partnering with other organizations to host a showing of a documentary, such as "In Utero", as a discussion starter. This might be a follow-up on the screening of "Birthing Justice" by House of Hope in 2023

Then, a discussion could be facilitated where:

- Each of the specialty areas represented share what they do and what they see they could be doing to increase services or support for pregnant and parenting individuals during the perinatal period. It is hoped that this will increase awareness of the breadth of services and increase referrals between participants.
- Participants can explore how they can and want to work together.
- The group decides if they want to continue meeting and for what purpose.
 - They could consider re-energizing the Perinatal Learning Collaborative and who will take the coordinating lead.
 - They could also consider writing a "white paper" on what all perinatal care providers can contribute to improving maternal health care.



Suquamish Health Clinic Director and Kitsap Public Health Board Member Stephen Kutz poses a question during the forum.

Objective 3: Improve funding and resources that address maternal and infant health needs in Kitsap County

Adequate and sustainable funding and a robust health care workforce are key to improving and maintaining maternal and infant health. The actions outlined below are targeted to achieve both and can be modeled as described.

Action A: Explore feasibility of establishing sustainable funding to promote healthy child development – some examples include King County’s “Best Starts for Kids” model, Whatcom County’s initiative that created the “Healthy Children’s Fund,” and/or creation of a Public Hospital District.

- **Best Starts for Kids 2.0**

- With over 62% approval, King County voters overwhelmingly chose to renew the Best Starts for Kids levy in August 2021. The plan for Best Starts 2.0 will maintain current Best Starts for Kids investments in promotion, prevention, and early intervention, while deepening investments to address critical needs in the community.
- Best Starts reported the following 2016 – 2021 outcomes:
 - Among Best Starts programs that provide postpartum breastfeeding supports, 96% of parents started breastfeeding.
 - Kids whose families participated in the Child Plus home visiting program showed a 57% improvement in kindergarten readiness compared to when they started the program.
 - 99% of families in community-designed home visiting programs reported that they felt more concrete support from their community and 96% said they increased their knowledge of parenting and child development.
 - 89,000 children and families were supported with 6.5 million items that are critical for raising children like healthy food, diapers, car seats, or clothes.
 - The number of families receiving child developmental support increased by 34% since 2015; over 70% of children served made progress in the key developmental areas of social and emotional development, acquiring knowledge and skills, or taking action to meet their needs.

“It’s the first 1,000 days – from conception to age 2 – in which half of your adult health has been programmed.”

- Stephen Bezruchka, MD
Associate Teaching Professor Emeritus
School of Public Health, University of Washington

- **The Healthy Children’s Fund** (also known as Proposition 5, passed in 2022)

- The Healthy Children’s Fund is a dedicated fund that was approved in the November 2022 election in Whatcom County. It is dedicated to the idea that improving the health of our youngest residents improves the health of the entire community. The intended uses are as follows:
 - In providing added resources for children and families that will increase access to early learning and day care and decrease disparities caused by race, geography and income, and reduce homelessness and child neglect and abuse, under consideration are the following:
 - Raising pay for childcare workers who earn an average \$30,000 a year;
 - Offering subsidies for families;
 - Recruiting more mental health and behavioral health professionals to Whatcom County;
 - Creating childcare “hubs” to share administrative services;
 - Funding small capital projects.



The Kitsap Maternal and Infant Health Forum featured panelists from the state Department of Health, Kitsap Public Health District, Suquamish Tribe, Kitsap Mental Health Services, Kitsap OBGYN, and St. Michael Medical Center.

• **Public Hospital District**

- Learn how other Washington counties established public hospital districts and how they benefit the health of the residents. A public hospital district (PHD) is a tax-based special district that focuses on healthcare needs in a defined community. A PHD could provide funding for services in areas like primary care, OB/GYN, emergency medical services, or mental health.
- A PHD could support existing providers and networks and attract new providers to support a robust healthcare system. A PHD is not limited to providing hospital services and would provide long term funding for healthcare.

Action B: Advocate for healthcare funding and policies at the state level that expand coverage to holistically support optimal maternal and infant health with wrap around support services – housing, food, transportation to healthcare appointments, etc.

States are taking significant steps to improve maternal health outcomes across different programmatic areas: (1) coverage and benefits; (2) care delivery transformation; and (3) data and oversight, but there are opportunities to further promote more equitable outcomes. Given the unparalleled role that Medicaid plays in covering births in the U.S., states can collectively transform maternal health nationally – particularly among births to Black and American Indian/Alaska Native people. By building on existing policies, learning from other states, and using race explicit strategies that acknowledge historically disenfranchised communities, states can lead the charge to eliminate maternal health disparities in the U.S.

Action C: Foster the development of a robust and diverse maternal and infant health workforce.

Bring together representatives of organizations that train health care providers to respond to the workforce-related findings in the Johns Hopkins University 2023 Kitsap County healthcare systems assessment. Organizations include:

- Olympic College Workforce Development Department
- University of Washington
- Virginia Mason Franciscan Health Residency Programs
- West Sound Technical High School
- Bremerton Housing Authority
- Peninsula Community Health Services
- Local midwives and doulas

Kitsap County data in this report are from the 2023 Kitsap Public Health District Community Health Assessment (CHA). To access the CHA or other Kitsap Public Health District data products, visit kitsappublichealth.org/information/data.php

**HAVE QUESTIONS
ABOUT THIS REPORT?**



Reach us at
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