On July 20, 2023, Kitsap Public Health District, in partnership with Kitsap County and Virginia Mason Franciscan Health, hosted the Kitsap Maternal Infant Health Forum at the Marvin Williams Center in Bremerton, Wash. 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.

Of the 190 individuals invited from community, the forum drew 90 attendees representing 44 organizations. Participants ranged from local healthcare and mental health professionals to parents and policymakers. The forum was structured around five main elements: community gathering time, video storytelling, a multidisciplinary panel session, focused tabletop discussions, and time to review data on Kitsap trends in maternal and infant health.


The Maternal Mortality report found that from 2014-2020, there were 224 pregnancy-associated deaths (deaths that occurred during pregnancy or within one year following a pregnancy) and 97 pregnancy-related deaths (deaths caused by or linked to pregnancy complications) statewide. Of the 97 pregnancy-related deaths, the panel found that 80% of deaths were preventable. The leading underlying causes of pregnancy-related deaths were behavioral health conditions.

In Kitsap County, many organizations have been working to understand and address concerning trends in maternal and infant health. For example, the percentage of Kitsap residents receiving adequate prenatal care during pregnancy has declined since 2016. Almost half (48%) of Kitsap residents who gave birth in 2021 did not receive adequate prenatal care, compared with 30% of Washington residents.

Factors affecting maternal health access include bias and discrimination, lack of screening, continuity of care, or access to health care and behavioral health treatment. More so, significant progress must be made to ensure maternal and infant health outcomes are improved for Black and Indigenous communities, the populations bearing the poorest health outcomes and greatest risk factors.
The forum featured six panelists representing the Washington State Department of Health, Kitsap Public Health District, Suquamish Tribe, Kitsap Mental Health Services, Kitsap OBGYN, and the Birthing Center at St. Michael Medical Center.*

Each panelist answered two main questions:
- What do you think are the largest challenges and obstacles to improving maternal and infant health?
- What solutions would you propose?

These quotes highlight key insights from the multidisciplinary panel:

**Katie Eilers, Washington State Department of Health:**
“...investing in community led solutions. Communities who experience disparate outcomes have the expertise and cultural knowledge to influence improving of care and experiences and we want to invest what their decisions are.”

**Dr. Gib Morrow, Kitsap Public Health District:**
“...Those of us who are working as caregivers from different health systems need to see themselves as collaborators, rather than competitors, in this community-based mission to get our moms the most appropriate care throughout pregnancy and well into infancy.”

**Amber Winemiller, Suquamish Tribe WIC:**
“...Replenishing the workforce here, the labor force and healthcare providers is obviously huge... Knowledge is power and an empowered person will feel more comfortable and will be more likely to seek the care that they need.”

To view a recording of the full panel discussion, scan this code or go to: vimeo.com/kitsappublichealth/maternalhealth

*It was noted by forum participants that having a doula or midwife representative on the panel would have been beneficial. This recommendation will be carried forward.
FOCUSED TABLETOP DISCUSSIONS

Tabletop discussions gave participants the opportunity to listen, reflect, center stories and describe the types of solutions necessary to turn the curve on maternal and infant health trends in Kitsap County.

Prior to the event, participants selected which table topic they were most interested in exploring at the nexus of maternal and infant health. Each table represented a significant area of focus building from the Washington State Maternal Mortality Review Panel priority policy and funding recommendations.

These identified priority areas are:

- **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 health care 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

Workforce and recruitment were also added as a focus topic area in recognition of hardships regarding a stressed and insufficient workforce in Kitsap County.

RECOMMENDATIONS & RELATED ACTIVITIES

Forum participants generated an abundance (294 Post-it notes) of place-based solutions to be acted on by a diverse set of partners in Kitsap County to improve maternal and infant health trends across the County. The most common recommendations and related activities that emerged from the forum include:

**Collaboration (N = 57, 19%)**
- Create a workgroup where providers can build relationships, address challenges, and collaborate.
- Utilize different levels of health care to address maternal health gaps including midwives, doulas, and nurses.
- Embed additional services in prenatal and postnatal care like mental health, substance use treatment, and support services.

**Holistic, Cultural, and Client-Centered Care (N = 50, 17%)**
- Expand maternal health to include additional support for mental health, parenting education, postpartum care, and connections to resources.
- Expand home visit programs.
- Disrupt the traditional care model by using a client-centered approach to prenatal and postnatal care.

**Training (N = 34, 12%)**
- Conduct implicit bias, racism, cultural competence training with staff.
- Increase knowledge on mental health, substance use disorders including screenings, warning signs, and combating stigma.
Create a group therapy program for those planning to or have recently given birth.
Reduce barriers by embedding mental health services in existing structures in our community.
Eliminate stigma of the use of mental health and substance use disorder services during and after pregnancy.

Cultural Competency (N = 27, 9%)
- Train providers and implement use of plain language.
- Promote the incorporation of traditional/cultural practices into prenatal and postnatal care.

Additional recommendations relate to supporting the health care workforce, enhanced care coordination, and addressing systemic challenges such as innovative payment and reimbursement structures within the healthcare delivery system.

More examples include:
- Utilize providers other than OB/GYN to provide maternal care (N = 26, 9%)
- Centralized services (N = 25, 9%)
- Accessible facilities (telehealth, home visits, mobile clinics, etc.) (N = 23, 8%)
- Support healthcare workforce (N = 20, 7%)
- Recruitment of workers to medical field (N = 19, 6%)
- Increase number of facilities and providers (N = 17, 6%)
- Diverse recruitment (N = 14, 5%)
- Workgroup/community of practice (N = 14, 5%)
- Reimbursement (N = 13, 4%)
- Community outreach (N = 13, 4%)
- Additional data/research (N = 12, 4%)
- Warm hand-offs to services (N = 12, 4%)
- Increase housing availability (N = 10, 3%)
- Change eligibility requirements of services (N = 9, 3%)
- Consolidated list of resources (N = 9, 3%)
- Support legislation (N = 3, 1%)
- Health education (N = 2, 1%)

CONCLUSION

The Kitsap Maternal and Infant Health Forum provided a unique environment for local healthcare, mental health professionals, new parents, community advocates and policymakers to gather and co-create solutions. The recommendations and activities summarized in this report provide a sample blueprint for the ways in which community partners can (1) strengthen ongoing efforts that increase maternal health and (2) implement new endeavors to increase maternal and infant wellness outcomes in Kitsap County that inspire a community of practice.
Thank you to all the amazing Kitsap Maternal and Infant Health Forum participants, who represented 43 Kitsap organizations!

Agape Unlimited
Bremerton Housing Authority
City of Bremerton, Mayor’s Office
Community Leadership
Doula in Kitsap County
Easterseals Washington Kitsap County Parent Coalition
Holly Ridge Center
Kitsap Community Resources
Kitsap Breastfeeding Coalition
Kitsap County Mental Health, Chemical Dependency, and Therapeutic Drug Court Community Advisory Committee
Kitsap Mental Health Services
Kitsap Parent Child Assistance Program
Kitsap Pediatricians
Kitsap Public Health District
Kitsap OBGYN
Kitsap Strong
League of Women Voters
MultiCare
Naval Hospital Bremerton
Nurse Marine Corps
Nurturing Expressions
Office of the Governor, Public Health
Olympic College Nursing Faculty
Olympic Community of Health
Olympic Educational Service District 114
Local parents from Kitsap County
Peninsula Community Health Services
Peninsula Early Childhood Coalition
Rep. Derek Kilmer’s Office
Sen. Emily Randall’s Office
Suquamish Tribe
True North Birth Center
University of Washington
Virginia Mason Franciscan Health St. Michael Medical Center leadership
Virginia Mason Franciscan Health Community Health
Virginia Mason Franciscan Health Family Practice Residency Program
Virginia Mason Franciscan Health St. Michael Medical Center Family Birth Center
Virginia Mason Franciscan Health Social Work program
Washington State Department of Children, Youth, and Families
Washington State Department of Health
Washington Health Care Authority
Washington State Parent Ambassadors
YWCA Kitsap

SOURCES

2. Kitsap Public Health District Adequate Prenatal Care Dashboard, based on data from the Washington State Department of Health data and the American College of Obstetricians and Gynecologists “Adequacy of Prenatal Care Utilization” scale
3. Kitsap Public Health District Adequate Prenatal Care Dashboard, based on data from the Washington State Department of Health data and the American College of Obstetricians and Gynecologists “Adequacy of Prenatal Care Utilization” scale

To view more local health data scan this code or go to: kitsappublichealth.org/data