

## EXPANDED HOME VISITING PROGRAMS

National research shows that home visiting results in improved prenatal health. To prevent preterm births, Minnesota has expanded its home visiting program. Minnesota has successfully supported the start-up or expansion of home visiting programs in four tribal nations and more than 70 counties over the last two years. This state grant funding was authorized by the 2017 Legislature and signed into law. MDH currently oversees \$35.7 million in federal and state funding to support home visiting services across Minnesota with 95% of counties and 81% of tribes implementing evidence-based home visiting programs.

## DOULAS FOR DADS

Ramsey County is the home of St. Paul and Minnesota's second most populous county. The Ramsey County Birth Equity Community Council is a public-private collaborative focused on racial healing and public health strategies to reduce inequities in birth outcomes. After community conversations, it became clear that though there was some support for moms, dads were left out of efforts addressing higher infant and maternal mortality rates for black babies and moms. The group decided to start Doulas for Dads. The idea was that by training men to become certified doulas and lactation educators, they would also become advocates for women and infants when dealing with medical systems and medical providers. A total of 10 men have been trained as certified perinatal educators as of July 2019.

## INFANT MORTALITY AMONG AFRICAN AMERICANS PROJECT

Hennepin County has the largest concentration of African Americans in Minnesota. The infant mortality rate in the county among U.S.-born African Americans is 3.4 times higher than whites. The Infant Mortality among African American Project acknowledges that the difference in the infant mortality rate goes beyond maternal characteristics, behaviors and access to health care, and is influenced by other factors including social issues and individual and family circumstances.

To address this complex issue, the Minnesota Department of Health is using a community engagement model that brings together the perspectives of the community through a Health in All Policies approach. The health department formed a Community Voices and Solutions leadership team to guide the 5-year project that is funded through 2020. The leadership team consists of about 20 members representing community groups, grassroots organizations and local and state health departments. The team is currently working together to determine key conditions and barriers contributing to health inequities. The group has hosted a summit to develop a sustainability blueprint for addressing U.S.-born African American infant mortality, proposed strategies for addressing U.S. born African American infant mortality and hosted two rounds of community co-learning sessions that resulted in four community action teams.

## 17P QUALITY IMPROVEMENT PROJECT

With Minnesota and the nation as a whole continuing efforts to reduce infant mortality, the Minnesota Department of Health is highlighting the value of progesterone to prevent preterm births. The most effective strategies for a woman who has already had a premature infant is a series of progesterone shots called 17P. The health department and other partners have been working with Minnesota clinics to get this important treatment to expecting mothers. The 17P Quality Improvement Project started in 2016 is focused on educating providers, identifying women for the treatment, addressing barriers and sharing best practices for helping expecting mothers complete the series of shots.

Minnesota clinics have already seen success with 17P implementing national guidelines from The American College of Obstetricians and Gynecologists and The Society for Maternal-Fetal Medicine. Results from clinics in Minnesota are consistent with national research findings that the progesterone injections can help prevent premature births. The effort to increase the use of 17P is supported by a coalition of partners formed in 2016. The partnership includes the Minnesota Department of Health, Minnesota Perinatal Organization, Minnesota Prematurity Coalition and March of Dimes. The Minnesota Perinatal Quality Collaborative established in 2018 seeks to improve maternal and infant health outcomes with emphasis on racial and ethnic health inequities. It is facilitated by the Minnesota Department of Health and the Minnesota Perinatal Organization. The next cohort of the 17P project will be guided by collaborative members and 17P faculty within the MNPQC.