SUMMARY STATEMENT

The Wisconsin Title V Maternal Child Health (MCH) Program in the Division of Public Health, Department of Health Services is striving to improve birth outcomes and reduce disparities. Based on the 2020 MCH Needs Assessment, the MCH Program identified new state performance measures related to African American Infant Mortality and High-Quality Perinatal Care. Through collaboration and partnerships, multiple strategies are being implemented.

ACTIVITIES AND RESULTS

The Wisconsin Division of Public Health recently established a new unit focusing on maternal and infant mortality prevention. A goal of the unit is to identify and expand promising practices in community-based health promotion. To support this work, two new Community Partnership Specialists positions were created. The Community Partnership Specialists serve in a role similar to organization navigators between the state and community-based organizations and support prevention work. They are recruited from, and based in, communities of highest need.

A new project is being implemented to identify strategies to integrate the Medicaid Prenatal Care Coordination benefit and doula services for women at high risk of an adverse pregnancy outcome. This effort will be implemented in Madison/Dane County and the City of Milwaukee. With this model, doulas will provide Prenatal Care Coordination services, adding a cultural perspective, community connectedness, and maternal advocacy, as well as support during labor and delivery.

Local and tribal health agencies in Wisconsin receive MCH funding to make improvements to advance health equity as they support mothers, children and families in their communities. Agencies assess organizational capacity by completing the Foundational Practices for Health Equity Checklist and Wisconsin's Community Engagement Assessment Tool. Based on those assessments, agencies select areas for improvement, develop action plans, and implement practice changes to enhance community engagement and advance health equity for the MCH population.

Members of Wisconsin’s Perinatal Quality Collaborative recognize the importance of working together to improve the quality of perinatal care in Wisconsin. In the spring of 2020, the Alliance for Innovation on Maternal Health (AIM) accepted the Wisconsin Association for Perinatal Care’s application for Wisconsin to become an AIM state. The first quality improvement bundle to be implemented will focus on severe maternal hypertension.

COVID RELATED WORK

The Wisconsin Pregnancy Risk Assessment Monitoring System (PRAMS) collects population-based data on maternal attitudes and experiences before, during and shortly after birth. A grant was awarded from the University of Wisconsin-Madison, Contemporary Social Problems Initiative to support the addition of questions to the PRAMS survey focused on social determinants of health. All PRAMS respondents will be asked about housing stability and adequacy, respectful maternity care, and economic impacts of COVID-19 during 2020 data collection. The grant funding will also support an oversample of women who self-identify as American Indian or Alaska Native on the birth record. As additional PRAMS data becomes available, it will be disseminated to key partners, and data-to-action activities will be identified to promote healthy birth outcomes.

The Spotlight documents were prepared by state health departments to highlight state progress toward improving health outcomes for moms and babies.
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