 ***DELAWARE HEALTH* AND SOCIAL SERVICES**



**Division of Public Health**

**Well Woman Committee and Black Maternal Health**

**Meeting Minutes**

**Date:** February 28, 2023

**Chair/Facilitators:** Tiffany Chalk, Susan Noyes, Leah Woodall

**Recorder:** Vonnetta Graves-Brooks

**Location:** Zoom

**Well Women Committee’s Primary Focus**:

* Focuses on a comprehensive and evidence-based approach to reproductive health and the health of women before, during and between pregnancy
* Focused on a women centered, and clinician engaged care.

**Black Maternal Health Workgroup’s Primary Focus:**

* The Black Maternal Health Workgroup focuses on how to address the persistent maternal health disparities gap, by bringing awareness through grassroots organizations, educating consumers so educators and black women can have better outcomes before, during and between pregnancy.
* Focuses on maternal mental health

**Welcome and Introductions-** Meetingwas called to order by Tiffany Chalk at 9:06 am.

Tiffany Chalk, Susan Noyes, Leah Woodall, George Yocher, LaToya Brathwaite, Cynthia Guy, Joan Kelley, Representative Melissa Minor-Brown, Ida Lewis, Khaleel Hussaini, Dionne Price, Cindy Biederman, Mona Liza Hamlin, Ama Amponsah, Michelle Mathew, Isabel Rivera-Green, Alex Parkowski, Yvonne Fletcher, Erika Pickle, Leora Sansone, Kimberly Liprie, Chelsea Manwiller, Krissy McMahon, Shane Darby, Dr. Marshala Lee.

**Review of Minutes** - Review of September 20,2022 minutes next meeting. All minutes will be posted at the following link:

[Meeting Information & Materials | Delaware Healthy Mother and Infant Consortium - Delaware Thrives (dethrives.com)](https://dethrives.com/dhmic/dhmic-meeting-materials)

**Well Woman Promotion and Education**

1. Webinar on Teen Health and Wellness – May (TBD)
2. LaToya Brathwaite- Is In the process of coordinating with the DAPI coordinator. They are planning to create an adolescent health and wellness webinar in May (TBD). LaToya is currently working on putting together an outline and will collaborate with the DAPI coordinator to determine which specific topics of concern will be their primary focus areas. Physical and emotional health is one of the potential focus areas. Once LaToya receives the exact title and date, she will forward that information.
3. Tiffany Chalk- Last year the committee agreed to host quarterly educational webinars with our partners. DAPI is one of the recipients of the Healthy Women’s Healthy Babies mini grants.
4. Tiffany Chalk- We extend an invitation to have your organization host a webinar, which was prompted by the HER Story campaign, launched in 2021, which elevated the voices and featured a webinar with women’s voices about their experience before, during and between pregnancy; HER Story was an awareness and advocacy piece to get information out to the community. If anyone’s organization would like to discuss hosting a webinar later in the year that speaks to the topics of this group, please reach out to Tiffany Chalk at [tiffanychalk@gmail.com](mailto:tiffanychalk@gmail.com) or LaToya Brathwaite at [LaToya\_FNP@motherbabyandbeyond.com](mailto:LaToya_FNP@motherbabyandbeyond.com) .
5. Susan Noyes- LaToya has been in her position for six months but is not new to many in this group and is learning and meeting new partners. If your organization is in the teen space or if you have ideas, please send LaToya an email.

**DHMIC Strategic-Plan Goals**

1. In the next 3-5 years, DHMIC would like to set the following aspirational goals:
   * The elimination of disparities between White, Black, and Hispanic infant and maternal mortality.
   * The reduction of pre-term birthrate from 11% to less than 7% to be the lowest in the country.
   * The development of an innovative model of care that addresses both the health disparities and the reduction in pre-term births.
2. Develop 3-5 SMART objectives, circulate final plan once adopted by DHMIC members.

Susan Noyes**-**The compilation of the aspirational goals started from the bottom up, with input from many people, starting in August 2022. The strategic plan process included information taken from surveys, key informant interviews and group interviews as well as two in person retreats for the DHMIC members. The analysis from the surveys, interviews and focus groups were shared with at the two DHMIC retreats to go over this information to develop these aspirational goals. A main aspirational goal is to eliminate disparities, which is unacceptable in Delaware. The different committees will look at different strategies to reach this goal. The aspirational goals will be discussed, voted on and approved during the DHMIC quarterly meeting which follows this meeting. Then at the next committee meeting a robust conversation on the best next steps and how to set the smart objectives will be discussed before a final plan is developed. The SMART objectives are a fluid document. HMA led and facilitated the DHMIC strategic planning retreat and led the methodology to incorporate feedback into the planning development.

Leah Woodall- Posted in the chat the methodology used to collect the feedback from all stakeholders. The plan will be presented to the full consortium, once adopted, and finalized, the committees can review and discuss the attached one-year action plan. The one-year action plan was sent in an email invite. The SMART objectives would be developed at the committee level based on the high-level goals for a term of 1 to 3 years, showing progress.

Susan Noyes- Although, not part of the aspirational goals, but extremely important is to have more community engagement and ensuring there is a diverse stakeholder group at the table.

Tiffany Chalk**-** Encouraging participants to attend the 10:30am DHMIC Quarterly Meeting. The link was dropped in the chat. Last virtual DHMIC meeting. Starting in May the DHMIC meetings will be in person (TBD; pending location availability). The DHMIC Summit on April 18th at will be in person at the Chase Riverfront in Wilmington, DE.

Susan Noyes- The goal is to meet in person for the DHMIC Quarterly meetings, contingent upon logistic issues and location availability being resolved.

5. Black Maternal Health Awareness Week theme and planning

**2023 Theme for Black Maternal Health Awareness Week, “Our Bodies Belong to Us! Restoring Black Autonomy and Joy”**

When: April 11th-April 17th

Black Maternal Health Awareness Week was established by the Black Mamas Matter Alliance

* **Identify local activities/events**
  + Shane’ Darby- Doula Care Erica Allen, doula trainer based mainly in Kent County. Every year Erica’s Do Care organization has a black birth expo, this year it will be held on April 16th. Once Shane gets a flyer she will share.
  + Shane’ Darby- On Saturday April 16th Ubuntu and Black and Indigenous Birth Workers of Delaware, two black led organizations are having an event on April 15th. Shane is waiting to receive a finalized flyer.
  + Shane’ Darby- Every June, Black Mother’s Empowerment go to barbershops to speak with black men about black maternal health care and how they can support black women. Their health matters are also discussed.
  + Shane’ Darby- Delta Sigma Theta sorority are looking to collaborate on a black male initiative possibly on April 14th
  + Shane’ Darby- Shane’ Darby’s doula cohort is planning something for Black Maternal Health Awareness Week, she does not have a date for their event yet.
  + Shane’ Darby- Is open to collaborate with other organizations

Dr. Marshala Lee- Dr. Marshala Lee is no longer serving as a chair for the Physical and Mental Health Community on behalf of Delta Sigma Theta Sorority, as of now there is not a Physical and Mental Health Community outreach program.

Tiffany Chalk- National Coalition of 100 Black Women usually have health programs on the third Thursday of the month. They have a preliminary event date on April 20th

Dionne Price – New health chair, new to the role. Dionne advised nothing has been done since 2020, with going back to meeting in person she is looking forward to having events at the route 9 library. Nothing has been formalized. In collaboration with Tiffany Chalk and representative Melissa Minor-Brown, further conversations regarding the Momnibus Act and getting more resources into the community will be discussed.

Tiffany Chalk- One flyer that list all the events will be housed on DeThrives.com.

The individual organization’s flyers will also be shared.

Lisa Klein- Advised that MCDRC is willing to share and provide information and resources regarding maternal death and fetal/infant mortality.

**-Promotion activities**

* + **April 14:** Delta Sigma Theta Sorority are looking to collaborate on a black male initiative
  + **April 15:** Ubuntu and Black and Indigenous Birth Workers of Delaware, two black led organizations are having an event
  + **April 16:** Dual Duala Care – Doula Care, Erica Allen, doula trainer based mainly in Kent County. Every year Erica’s Do Care organization hosts a Black Birth Expo
  + **April 18:** Tiffany Chalk – Further conversation discussing the Momnibus Act with Dionne and representative Melissa Minor -Brown to have resources in the community.
  + **April 20:** Tiffany Chalk/Dionne Price—National Coalition of 100 Black Women usually have health programs on the third Thursday of the month. They have a preliminary event date on April 20th.
  + **Week of BMHAW, TBD:** Shané Darby – Shane’ Darby’s Black Mother’s in Power doula cohort is planning something for Black Maternal Health Awareness Week, she does not have a date for their event yet.

* + Dionne – New to the role, newly a health chair role, nothing has been done since 2020. With going back to meeting in person, looking to have events at the Route 9 library. Nothing has been formalized. Further conversation discussing the Momnibus Act.

**Update: Maternal Health Warning Signs**

Leah Woodall- DPH is working closely with the Maternal Child Death Commission.

Lisa Klein- Sought out a lot of community input, while in development there were several iterations. Using relatable verbiage, the documents were customized to meet the needs of the people in Delaware. Documents addresses issues during pregnancy and post pregnancy, up to a year after pregnancy. A third of deaths of women in Delaware happen after the first 6-weeks of pregnancy. In Delaware, a third of deaths occur during the middle part of pregnancy, a third during birth first 6 weeks and a third during that last period. A focus was placed on ensuring mental health issues were captured because most of the deaths involve substance abuse and mental health disorders.

Lisa Klein- Flyers have been translated into Haitian Creole and Spanish. They may need to be translate into Arabic and Mandarin Chinese.

Shane’ Darby- Inquired if staff has been provided training regarding educational material being disseminated and promoted.

Lisa Klein- providers, practitioners and support staff will be educated.

Dr. Marshala Lee- Advised providing education is the easy thing to provide. Things that are in DHMIC’s control is to educate. The lack of education may not be the reason why black women are dying. There are a lot of flyers and brochures that are in the community. Women know and have voiced concerns about their bodies and are not being taken seriously. DHMIC is responsible for attacking maternal health disparities in the state; it cannot accomplish reducing and/or eliminating these disparities without a concerted effort to educate providers. Firstly, we need to really hone in on identifying where the disparities are existing and where are the gaps. This determination will determine where the additional training and resources need to be placed. In addition, it likely will require system level involvement. Some hospitals may push back saying they have their own flyers and brochures and may choose not to disseminate the information. DHMIC needs to have the health system partners more engaged and at the table when creating resources and holding them accountable.

Shane’ Darby- Community has a hard time trusting health institutions. Other black led organizations do not want to deal with the groups due to recent and past things that have happened. The flyer is a great advocacy tool. For effectiveness we must work jointly with hospitals and providers on training and accountability.

Khaleel Hussaini- To temper expectations, as a DHMIC body we are trying to provide the best science and available evidence to make this information available to the groups that we work with. In terms of advocacy and enforcement as to how these topics get adopted at the provider or hospital levels, all we can do is give the best information, it is up to the hospitals and providers to do it. As part of the QI work, DPQC is providing the best science and available evidence. Can we measure the voices of women being heard? Are we getting constant feedback? There are a lot of national surveys and things that are asked on PRAMS which are done on an annual basis, whether is HEIDES information regarding customer service satisfaction or PRAMS questions on quality of care. If were trying to perform quality improvements, maybe a more feasible solutions would be to adopt rapid surveys for women who are delivering at the birthing institutions and ask them specifically, about the maternal warning signs looking at data in a more real time fashion. Regarding addressing the literacy piece, the community intervention teams should probably work on addressing this concern.

**Take Aways**:

* Temper expectations
* We cannot enforce. We can make laws but there is an issue of enforcement
* What are the repercussions for not following the set-out laws? These are larger conversations that are beyond this scope.
* What is most practical and feasible is to continue to provide sound QI work.

**ASTHO-Delaware Contraceptive Access Now (DE CAN) Collaborative**

Leah Woodall- We have made concerted efforts to reduce the unintended pregnancy rate in Delaware. Fortunately, Delaware has received some large investments from philanthropists that came to Delaware, who developed the Delaware Contraceptives Access Now Program(DelCAN). Since 2015, we have been intentionally focused on this initiative. We continue our efforts to work with many of our family planning partners to provide contraceptives to all women regardless of insurance or ability to pay, low or no cost access to a full range of contraception methods. We are not slowing down! In addition, we participated in the Association of State Territorial Health Officials learning collaborative.

Michelle Mathew-Delaware was one out of six states who were selected to participate in this family planning and contraceptive access learning community. One goal was to develop a tool to get feedback, which our trainer, Leora has developed. Due to time constraints, an emailed with the tool attached can be sent to solicit your assessment and feedback.

Leora Sansone- The tool was developed for community health workers as a quick guide to family planning. It was designed to mimic one of our DeCAN trainings tools that are used. Some adjustments were made to make it more user friendly for non-clinical staff. Leora requested feedback regarding its user friendliness, use of language and advised any type of feedback is welcomed.

**Announcements:**

Susan Noyes- Preconception peer educator program, a messaging campaign for college age population and by college age population. The goal is that the program will be at the seven colleges and universities in the state. For additional information reach out to LaToya Brathwaite.

**Adjournment: 10:19am**

**Other Business:**