



Maternal and Infant Health Programs

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Title V Block Grant



- Federal-state-local partnership that is key source of support to improve the health and well-being of Minnesota’s mothers, children and families.
 - Federal funding: \$9.104 million
 - By state statute, \$6 million to local public health
 - Required 75% state match
- In 2019, the MCH Programs served:
 - 39% of pregnant women
 - 100% of infants under one
 - 39% of children and adolescents
 - 100% of children with special health care needs

Title V Block Grant



- Relevant Title V priority areas (2020-2025) include:
 - Care during pregnancy and delivery
 - Infant Mortality
 - Accessible and Affordable Health Care
 - American Indian Families
 - Parent and Caregiver Support
- At MDH, Title V provides programmatic support for maternal, infant, child, and adolescent health including technical support
- Local Public Health uses Title V funds to support local needs
 - Ramsey County's Birth Equity Community Council engages the community to prioritize action, including creating the Doula Dads training to empower men as perinatal educators

Birth Defection Prevention and Screening



- Birth Defects Prevention
 - New grants to imbed preconception care in well-child doctor's visits to improve mother's health
 - Two grants for community-led projects addressing risk factors for the most common birth conditions (e.g. smoking, substance misuse, hypertension)
- Birth Defects Surveillance – 2,200 families served annually
 - Monitor trends of birth defects to detect emerging health concerns and identify affected populations
 - Assure appropriate services are provided to affected families
 - Stimulate research on risk factors, treatment, prevention, and the cure of birth defects

Improving Maternal Health

- **Minnesota Perinatal Quality Collaborative**
 - Seeks improve the quality of prenatal, labor and delivery, and postpartum care by creating a network of organizations, medical providers, and community voices to address specific maternal and infant health issues
 - Collaborating on premature births, maternal opioid use and hypertension
 - \$300,000 annual grant from CDC ending in 2022
- **Maternal Mortality Review Committee**
 - Multidisciplinary committee reviews every maternal death
 - Releases recommendations for changes in practice, systems of support, and patient education
 - Supported through a combination of Title V and State General Funds
- **Positive Alternatives Grant Program**
 - Promoting healthy pregnancy outcomes and assisting pregnant and parenting women in developing and maintaining family stability
 - \$3,357,000 annually to non-profit organizations; 27 new grants in January 2021

Addressing Disparities in Maternal and Infant Health

- **Pregnancy Risk Assessment Monitoring System (PRAMS)**
 - Population-based survey on maternal behaviors and experiences before, during, and shortly after a woman's pregnancy
 - Data collected is not available from any other source
 - Used by Federal Reserve Bank Minneapolis, local public health, oral health program, Environmental Public Health Tracking
 - \$160,000 grant from CDC
- **Eliminating Health Disparities Initiative grants**
 - 25 grants to community-based organizations and tribes
 - Infant mortality and teen pregnancy are two of several priority areas
 - Around \$5 million State General Funds annually
- **Calling All Sectors Learning Collaborative**
 - Goal is no child is born into homelessness, with special emphasis on American Indian and African American families
 - Identify innovative solutions and forge lasting collaborations across state agencies and community organizations
 - Funded by Pew Charitable Trust and Robert Wood Johnson Foundation

Minnesota WIC Program

- A public health nutrition and breastfeeding program funded by USDA
 - Annual grant to MDH: \$33 M NSA* funding, \$57M Food funding
 - Serves over 100,000 low-income women, infants and children every month.
- In 2018, served approximately 40% of all infants born in Minnesota.
- Participants receive an individualized nutrition assessment along with education and referrals to community resources.
- WIC provides healthy foods including fruits, vegetables, whole grains and low-fat dairy.
- WIC promotes and supports breastfeeding, including exclusive breastfeeding for the first six months of an infant's life
 - Breastfeeding initiation has increased steadily in MN WIC between 2001 and 2019.
 - Many local WIC programs provide peer breastfeeding support to mothers and infants.
 - Women of all races/ethnicities with a WIC breastfeeding peer counselor had significantly higher breastfeeding initiation rates.



Thank you

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