

## Maternal & Infant Health Father's Day Edition

Involved fathers do make a difference!!

### Helping Fathers and Children Thrive

Children with more involved fathers have healthier, more fulfilling lives with fewer behavioral, emotional, and academic issues. [The Children's Center Fatherhood Initiative](#) in Detroit works to support fathers in their community by helping them play a leading role in their child's life.



### The Genesee County Healthy Start Engaged Father Program

The father engagement program seeks to: (1) increase fathers' participation in Healthy Start home visits; (2) increase fathers' attendance at prenatal and infant health appointments; and (3) increase fathers' knowledge of infant health and developmental milestones.

- Fathers often do not engage in (traditional) parenting programs and services
- Most programs are not tailored to fathers' needs: A meta-analysis of 77 parent training programs indicated that only four focused on fathers (Kaminski et al., 2008)
- Service providers are not well trained at engaging fathers

[The Engaged Father program helps Healthy Start programs](#) meet these goals through father-friendly parent education and home visitation by a fatherhood-focused community health worker. Fathers expect and desire to be engaged, however challenges faced by fathers differ and often go unmet by community programming.

### Fatherhood Training

Cole Williams is the CEO and Founder of ["Son To A Father"](#) and ["Cole Speaks"](#), programs that work to empower and restore relationships between teens, families and Fathers.

Cole's journey from growing up fatherless, becoming a single teenage father, reuniting with his father, and finally fostering and adopting fatherless son's are the lessons he uses to illustrate the colors of parenting in the 21st Century. Cole is a Motivational Speaker, Fatherhood Consultant, Facilitator, and most importantly a Father.

**"The absence of fathers in the lives of children is the biggest threat in our country"**  
- Cole Williams

Cole's work has been dedicated to providing Fatherhood training, support, and materials for:

- The Michigan Adolescent Pregnancy and Prevention Program (MI-APPP)
- Life skills and leadership development with incarcerated youth at the Kent County Juvenile Detention Center
- 12-week Fatherhood Workshop Series for incarcerated fathers
- 8-week Parenting Educational Workshop Series for Parents with Family Court involvement



## InvolvedDad – Flint MI

**InvolvedDad** is an organization that helps improve the quality of life for families by motivating and equipping fathers with the necessary tools to impact their sphere of influence. InvolvedDad provides resources such as literature, training, moral support, peer interaction, and bond building for those who are involved in their family lives as fathers, father figures, and male guardians. InvolvedDad's successful and innovative program **Man2Man University** is a peer to peer support group for males and fathers of all ages.

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## Fatherhood Resources

### Why are Dads Important?

Research shows that involved fathers provide something special in their children's lives. [Michigan Medicine Fatherhood Resources](#) show that students perform better academically, have fewer discipline problems, and become more responsible adults when their Fathers are actively involved in their learning.

Dads are roll models to their children, often teaching by example. They demonstrate skills, emotional regulation, healthy relationships, responsibility, moral and ethical values and more. Dads teach children skills and hobbies, building better relationships with their children and setting them up for a healthier, happier future.

### More Resources and Programs for Dads:

- [Head Start Early Learning & Knowledge Center Family and Father Engagement](#)
- [Resources and Toolkits on Strengthening Families and Fatherhood: in the Criminal Justice System](#)
- [Creating Father-Friendly Environments in Early Childhood Programs](#)
- [Project Fatherhood at Children's Institute](#)
- [Partnership for Dads](#)
- [National Responsible Fatherhood Clearinghouse for Dads](#)
- [Dad and Breastfeeding resources from USDA](#)
- [Detroit Dads Group](#)
- [The National Center for Fathering](#)
- [KidsHealth Educational Campaign Becoming a Father](#)

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## What can you do in your organization?

### Strategies to Engage Fathers in Service Deliver

- Conduct a survey or focus group to assess the needs of Dads.
- Assess agency policies that may be facilitating or hindering father involvement.
- Develop a strategy to engage fathers more actively.
- Is the timing of services flexible?
- What are the expectations for father engagement in service planning and deliver?
- Are fathers included in important decisions like case planning?
- Are appointment reminders sent to both mom and dad?

### Staff Behavior, Attitudes, and Biases

- Talk to your staff and clinicians about how they perceive the men in their setting.
- What do you know about the fathers you serve?
- What are staff and clinician attitudes about the fathers they serve?
- Do staff understand the role men play in children's lives?
- What biases might be influencing your efforts to engage with men?

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## Research

- [Father-inclusive perinatal parent education programs: A systematic review](#)
- [Father and Child Well-Being: A Scan of Current Research](#)
- [Fathers forgotten when it comes to services to help them be good parents](#)
- [Father Early Engagement Behaviors and Infant Low Birth Weight](#)
- [Testing the Feasibility of an Interactive, Mentor-Based, Text Messaging Program to Increase Fathers' Engagement in Home Visitation](#)
- [Caring is masculine: Stay-at-home fathers and masculine identity](#)
- [Research Brief: Parenting Programs for Incarcerated Fathers](#)
- [Attendance in Community-Based Fatherhood Programs](#)
- [Integrating Approaches that Prioritize and Enhance Father Engagement](#)

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Thank you for the work that you do each and every day to protect and promote the health of our Michigan moms, babies and families.

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Learn more about the  
[Mother Infant Health & Equity Improvement Plan](#)  
Sign up for [MIHEIP Updates and Emails](#)  
[Contact Us](#)



**MOTHER INFANT  
HEALTH & EQUITY  
IMPROVEMENT PLAN**



## MATERNAL INFANT HEALTH



**Registration for the Maternal Infant Health Summit is Now Open!!!**  
**Virtual Conference Dates are September 22-23, 2020,**  
**For more information please visit [MIHealthSummit.com](http://MIHealthSummit.com).**

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### Michigan HIV/STD Testing and Reporting Laws

Below is information about a continuing education opportunity for physicians, nurses and social workers related to changes in the Public Health Code:

Dear Colleague—see the letter below from Michigan’s Chief Medical Executive and Chief Deputy Director for Health, Dr. Joneigh Khaldun. MDHHS has developed a continuing education opportunity for physicians, nurses, and social workers related to changes in the public health code. We appreciate your dedication to the health of Michiganders.

#### [HIV and STD Public Health Law Revisions Webinar](#)

A webinar on Michigan’s HIV and STD Public Health Law revisions related to:

- HIV disclosure
- HIV and syphilis perinatal testing
- Testing algorithms and language
- Reporting guidelines

This [recorded webinar](#) has been awarded 1.00 educational hours for Nursing, Michigan Social Work, and AMA PRA Category 1™ Physician Credits.

#### **HIV and STD Public Health Law Revisions Webinar**

#### **HIV and STD Public Health Law Revisions Letter**

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# MATERNAL INFANT HEALTH



**For more information and registration visit [mihealthsummit.com/](https://mihealthsummit.com/)**

\*\*If you previously registered for the in-person conference, you will need to register again for the virtual conference. Please feel free to [contact our event organizers](#) with questions.

## Michigan Alliance for Innovation on Maternal Health

MI AIM is pleased to release the [Michigan Alliance for Innovation on Maternal Health \(MI AIM\) Handbook](#). As we move forward into 2021 and beyond, the [Regional Perinatal Quality Collaboratives \(RPQCs\)](#) will be supporting and incorporating the work of MI AIM into their Collaborative efforts.

[AIM](#) is a national data-driven maternal safety and quality improvement initiative based on proven implementation approaches to improving maternal safety and outcomes in the U.S. Michigan has been implementing two maternal patient safety bundles: [Hypertension](#) and [Obstetric Hemorrhage](#). This year, two additional bundles have been introduced: [Reduction of Peripartum Racial/Ethnic Disparities](#) and Maternal Sepsis. The partnership between MI AIM and the RPQCs will be vital in continuing to move toward reducing disparities in birth outcomes.

## MI AIM

MICHIGAN ALLIANCE FOR INNOVATION  
ON MATERNAL HEALTH

## Maternal Infant Health and Health Equity Website

The [Michigan Mother Infant Health & Equity Improvement Plan \(2020-2023\)](#) set a strategic vision to achieve zero preventable deaths and zero health disparities through collective action, community driven partnerships and collaboration. To further this work we have compiled available trainings and resources on our new [Maternal & Infant Health, Health Equity Website](#), the intention is to provide Maternal & Infant Health programs and partners across Michigan a starting place to address and incorporate health equity into their work.

This health equity resource list is not exhaustive, for in-depth, comprehensive trainings, an in-person training is the first recommended choice. [Please submit trainings, resources, comments and suggestions for consideration](#). We will continue to update the site as resources are made available.

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## Is Racism a Public Health Crisis?

During a [panel discussion on the impact of race in health care](#), community leaders pointed out the disparities Black Americans face when trying to attain comprehensive health care.

Vernice Davis Anthony, former president & CEO of the Greater Detroit Area Health Council, said inequities in housing, education and the criminal justice system in turn lead to poorer health outcomes for Black Americans. "If all lives matter, certainly all the data indicates that historically, Black lives have not mattered," she said. "Public health has not only the responsibility, but also the moral obligation, to directly confront and provide the leadership to dismantle racism and the impact it has on our nation's health, especially our African American communities."

The full panel discussion can be watched on the [Black Lives Matter Michigan Facebook](#).

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## Webinars and Events

### Film Screening 'Just Mercy'

[Free on All Platforms for the Month of June](#)

The movie follows Bryan Stevenson, a Harvard Law School graduate, who turns down many positions to go to Alabama in order to defend those who have been wrongly condemned or those not afforded proper representation.

### Film Screening "Cincinnati Goddamn"

The Wexner Center for the Arts is [screening](#) the film online free from June 1, 2020 to July 9, 2020.

Released as 2013's Black Lives Matter movement gained traction in the United States, "Cincinnati Goddamn" investigates the city's complicated history with antiblack racism and police brutality.

### Upcoming Webinar: Advancing Equity, Reproductive Health Services and Considerations for Women with Substance Use Disorders

The series will examine the intersection of the addiction and reproductive health and explore and promote best practices for advancing health equity and access to care among women with substance use disorders (SUD). [RSVP for the Health Equity and SUD series here](#)

The first session begins on Wednesday, July 15, 2020 and runs through December 16, 2020.

Webinars are 1:00 - 3:00 pm EST





## MATERNAL INFANT HEALTH



### Registration for Maternal Infant Health Summit Now Open!

The virtual conference will be streaming live on September 22-23.

The sessions will also be recorded and will be available until 12/31/2020.

For more information and registration visit [mihealthsummit.com/](http://mihealthsummit.com/)

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### Early Hearing Detection and Intervention (EHDI)

The [Michigan EHDI Program](#) works to provide better outcomes for Michigan newborns and young children with hearing loss and their families, through early hearing screening, appropriate audiological diagnosis, and intervention.

**EHDI's 1/3/6 goals include:**

"1" - All infants are [screened](#) for hearing loss no later than 1 month of age, preferably before hospital discharge.

"3" - All infants who do not pass the screening will have a [diagnostic hearing evaluation](#) no later

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"3" - All infants who do not pass the screening will have a [diagnostic hearing evaluation](#) no later than 3 months of age.

"6" - All infants with a hearing loss are enrolled in [early intervention services](#) no later than 6 months of age.

In 2018, **154 children were diagnosed with hearing loss** in Michigan. Unfortunately, there are children who are not identified in a timely manner or are never identified at all. **Almost half of infants in need of follow-up after a failed hearing screen, did not return for diagnostic testing in 2018.**

Timely detection of hearing loss is imperative to allow for intervention to begin as early as possible. Not knowing that a baby has a hearing loss can have a long-lasting impact on language and learning and is considered a developmental emergency.

### **How can partners assist?**

Michigan EHDI relies on a network of providers to assist families with follow-up through the 1-3-6 process. Provider follow-up with families is crucial in assisting with interfacing care systems to facilitate language acquisition milestones in children who are deaf or hard of hearing.



Michigan Early Hearing Detection and Intervention Program

For more information for parents and providers please visit the [MDHHS Early Hearing Detection and Intervention \(EHDI\) Program](#) or contact [Deb Behringer, EHDI Program Coordinator](#).

Resources & training available for [Birth Hospitals](#), [Midwives](#), and [Families](#).

## June is CMV Awareness month

[What is CMV?](#) Congenital Cytomegalovirus, or CMV, is the most common viral infection, and the leading non-genetic cause of hearing loss, that infants are born with in the United States. Every pregnant woman is at risk of acquiring CMV, and only 9% of women know about it.

### [Cytomegalovirus \(CMV\) infections in pregnant women is common, serious, and preventable.](#)

- One out of every 150 babies are born with congenital CMV, with one in five becoming ill or having long-term health problems.
- Leading cause of sensorineural hearing loss, vision loss, intellectual disability, impaired motor function and seizures.

For more information visit the [National CMV Foundation](#) or learn about [Cytomegalovirus \(CMV\)](#).

## [Challenges to EHDI during COVID-19](#)

Birthing hospitals, universal newborn hearing screening/early hearing detection and intervention (UNHS/EHDI), and diagnostic audiology services are faced with ever-changing and escalating challenges due to the COVID-19 pandemic. Caregivers and Providers are finding new ways to address challenges to ensure continuous care for children who are deaf or hard of hearing (D/HH).

Approximately **7.4 percent of Michiganders, identify as Hard of Hearing, Deaf, and/or DeafBlind.** That is just over 730,000 of our neighbors. The Michigan Department of Health and Human Services



and Division on Deaf, DeafBlind and Hard of Hearing developed a [Deaf and Hard of Hearing clinic document/tool](#) that can be used by clients and professionals in many settings.

For more information read: [A Census and Needs Assessment for Michigan's Deaf, DeafBlind, and Hard of Hearing Communities, September 18, 2019](#)

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### **Pregnancy, Birth, and Infant Outcomes Among Women Who Are Deaf or Hard of Hearing**

[Pregnancy, birth complications higher among deaf and hard of hearing women, suggests NIH-funded study.](#) Findings from this study indicate that deaf or hard of hearing women are at a heightened risk for chronic conditions, such as gestational diabetes and blood pressure disorders, pregnancy-related complications, and adverse birth outcomes. The infants of deaf and hard of hearing women were more likely to be born preterm, have low birth weight, and receive a low Apgar score.

#### **More Resources**

- [The American Speech-Language-Hearing Association \(ASHA\)](#)
- [Virginia Department of Health: Congenital Cytomegalovirus \(cCMV\) Training Series](#)
- [American Family Physician: Ear and Hearing Disorders](#)
- [National Deaf Center Resources](#)
- [Michigan Hands & Voices](#)

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