



MATERNAL INFANT HEALTH



The Hear Her Campaign
Raising awareness about maternal morbidity and mortality.



HEAR
HEAR HER concerns

700 women die
every year in the United States
from pregnancy-related
complications

Understanding Maternal Substance Use Disorders

A new [MMWR report](#) was released using data from Centers for Disease Control and Prevention (CDC's) Pregnancy Risk Assessment Monitoring System (PRAMS) show that about 4% percent of women reported using marijuana during pregnancy. Among women who used marijuana in the three months before pregnancy, 41% continued use during pregnancy. **The most common reasons for using marijuana during pregnancy were to relieve stress/anxiety, nausea/vomiting, and pain.**

These findings reveal a need for:

- Universal evidence-based substance use screening.
- Public awareness campaigns to promote understanding of substance use disorders (SUDs) and decrease SUD Stigma.
- Appropriate evaluation and care for women with severe pain or other possible pregnancy associated health complication.

The Hear Her Campaign stresses the importance of [listening to pregnant and postpartum women](#) if they experience concerns. When patients are engaged in their health care, it can lead to improvements in safety and quality.

Please spread the message by using [campaign resources](#) and sharing through your networks.

**There is so much incredible work going on to improve the care for moms, babies
and families across Michigan!**

Michigan Regional Perinatal Quality Collaboratives

[View the NEW Perinatal Quality Collaborative video](#) from the CDC which explains what [Perinatal Quality Collaboratives](#) are, how they work, and examples of successes in improving perinatal care.



The Perinatal Quality Collaborative (PQC) in Michigan is structured differently than in other states. Michigan's PQC is made up of [9 Regional Perinatal Quality Collaboratives \(RPQCs\)](#), which represent every Prosperity Region in Michigan. Each RPQC convenes regular meetings with diverse stakeholders and partners to address their respective region's largest maternal and infant health concerns.

RPQCs are charged with improving birth outcomes for moms, babies and families through data-driven quality improvement projects that are tailored to the strengths and challenges of each region. The RPQCs utilize both community and clinical approaches by bringing together health care professionals, community partners, families, faith-based organizations, Great Start Collaboratives, home visiting agencies, and others in a unified, collaborative effort.

Michigan Maternal Mortality Surveillance

For more information on Pregnancy-Related Deaths in Michigan visit the [Michigan Maternal Mortality Surveillance \(MMMS\) Program](#).

Recently released reports:

- [Maternal Deaths in Michigan, 2012-2016 Data Update](#)
- [Michigan Maternal Mortality Surveillance - Committee Recommendations](#)



Michigan Alliance for Innovation on Maternal Health (MI AIM)

[MI AIM](#) is a part of the [Alliance for Innovation in Maternal Health \(AIM\)](#), a national maternal safety and quality improvement initiative, with the goal of eliminating preventable maternal mortality and severe morbidity.

Michigan has been working on the implementation of the Obstetric Hemorrhage and Severe Hypertension bundles, improving health outcomes for mothers by combating the leading causes of preventable maternal mortality. The [AIM Patient Safety Bundles](#) are a structured way of improving care processes and patient outcomes. For more information view the [MI AIM 2020 Handbook](#).



MATERNAL INFANT HEALTH SUMMIT

Working Together
to Improve
Maternal and Infant Health
in Michigan

REGISTER NOW!

September 22-23, 2020
Live Virtual Summit

VISIT
MIHEALTHSUMMIT.COM
For more Information



The Maternal Infant Health Summit seeks to create synergy and align priorities between public and private organizations as well as provide educational opportunities that will allow members to keep abreast of the latest developments in the field.

FEATURED SPEAKERS



Renee Canady, PhD

Dr. Renée Branch Canady serves as Chief Executive Officer (CEO) of MPHl; a unique public trust dedicated to advancing population health through public health innovation and collaboration. In this role she leads the strategic direction of the organization as they strive to build a world-class infrastructure to support the Institute's diverse and progressive program areas and projects, while establishing and maintaining stakeholder relationships.

Joia Crear-Perry, MD

Recently, Dr. Crear-Perry addressed the United Nations Office of the High Commissioner for Human Rights to urge a human rights framework to improve maternal mortality. She has been celebrated for her work to improve the availability and utilization of affordable health care for New Orleans' citizens post the Hurricane Katrina disaster of 2005. Currently, her focus has expanded nationally and internationally as it relates to Maternal and Child Health.



Christine Dehlendorf, MD, MAS

Dr. Dehlendorf is a family physician with advanced training in family planning and a Master's Degree in Clinical Research. As the director of the Person-Centered Reproductive Health Program, she is a national thought leader in contraceptive counseling and health equity in reproductive health care.

Zea Malawa, MD, MPH

Zea Malawa is a pediatrician and public health professional committed to improving health outcomes for children of color. Currently, Dr. Malawa sees patients at Mission Neighborhood Health Center and she works for the San Francisco Department of Public Health leading a collective impact initiative to reduce racial disparities in birth outcomes.



Register Here for the virtual Maternal Infant Health Summit!

More Resources:

[Michigan Pregnancy Risk Assessment Monitoring System](#) for more population-based data about maternal attitudes and experiences before, during, and after pregnancy.

[AIM Patient Safety Bundle: Obstetric Care for Women with Opioid Use Disorder \(+AIM\)](#)

[WEBINAR: Improving Maternal Health Outcomes: Addressing Opioid Use During Pregnancy](#)

Address health disparities and inequities associated with maternal health, opioid use disorder (OUD) and substance use disorders (SUD). Model interventions to ensure pregnant mothers have access to equitable care and treatment during the COVID-19 pandemic will be discussed, along with resources to improve maternal health outcomes and enhance integrated care models.

TIME and DATE: August 25, 1:00pm - 2:15pm EST

[WEBINAR: Fetal Alcohol Spectrum Disorders \(FASD\) and Education Virtual Workshop](#)

Three unique sessions will focus on individuals with FASD and behavioral and educational strategies across the life span. Parents, caregivers, teachers, healthcare professionals, individuals with FASD are all welcome. Please contact Melissa.Zuteck@spectrumhealth.org to RSVP.

TIME and DATES: 7:00pm- 8:30pm, EST

- Session 1: Elementary School Children - September 15
- Session 2: Junior and High Schoolers - September 22
- Session 3: Making the Transition into Adulthood - September 29

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