

**MIHP Biweekly Update**

**August 13, 2024**



**Maternal Infant  
Health Program**

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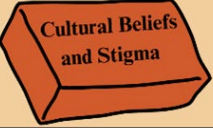



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## Inclusive Insight

This month's Inclusive Insight focuses on challenges faced by immigrant families of children with Autism Spectrum Disorder (ASD). It will highlight the factors such as cultural beliefs, access to services, and communication challenges.

[Click here to expand the August edition of Inclusive Insight.](#)

### Challenges Faced by Immigrant Families of Children with Autism Spectrum Disorder (ASD)

	<ul style="list-style-type: none"><li>• <b>Cultural Interpretation of Behaviors:</b><ul style="list-style-type: none"><li>◦ In some cultures, avoiding eye contact is perceived as a sign of respect rather than a sign of ASD. Additionally, certain behaviors might be attributed to religious beliefs, with the child's behavior sometimes viewed as a reflection of the parents' actions, leading families to seek spiritual support.</li></ul></li><li>• <b>Social Isolation:</b><ul style="list-style-type: none"><li>◦ Many parents avoid public spaces to prevent judgment due to their child's behavior, which may be perceived as disruptive.</li></ul></li></ul>
	<ul style="list-style-type: none"><li>• <b>Misdiagnosis and Dismissed Concerns:</b><ul style="list-style-type: none"><li>◦ Providers may dismiss parents' concerns or incorrectly diagnose ASD as delayed developmental milestones due to immigration status and experiences, leading to delays in receiving appropriate support.</li></ul></li><li>• <b>Delayed Intervention:</b><ul style="list-style-type: none"><li>◦ A delayed diagnosis results in missed opportunities for early intervention, which is crucial for maximizing developmental benefits.</li></ul></li></ul>
	<ul style="list-style-type: none"><li>• <b>Long Wait Times</b><ul style="list-style-type: none"><li>◦ Scheduling an appointment is a lengthy process due to required referral letters. Once obtained, the wait times for appointments are extended, and services are often far from the neighborhood, forcing caregivers to take time off work.</li></ul></li><li>• <b>Insufficient Information</b><ul style="list-style-type: none"><li>◦ Families often receive inadequate information about the next steps following a diagnosis, fully understanding the diagnosis, and understanding insurance policies related to the diagnosis to identify support.</li></ul></li></ul>
	<ul style="list-style-type: none"><li>• <b>Dialect and Language Issues:</b><ul style="list-style-type: none"><li>◦ Translation inaccuracies can occur due to differences in dialects and languages, affecting the clarity of information.</li></ul></li><li>• <b>Feeling of Helplessness</b><ul style="list-style-type: none"><li>◦ Families may feel overwhelmed and powerless when navigating services in an unfamiliar country and language.</li></ul></li></ul>

### Recommendations from Literature



Hiring bilingual and bicultural staff to communicate effectively with and understand diverse cultural backgrounds will support families and engage with immigrant communities by providing general child development information. This approach would encourage their participation in evaluations and early intervention for autism.



Health professionals should ensure ongoing support after a diagnosis by advocating for comprehensive follow-ups. They should guide families on child development programs and share reliable community resources. To maintain home services, professionals must collaborate with families on goals and teaching methods. Health professionals should clearly explain their services so parents can understand and apply them at home.



It is recommended to inform caregivers of their legal rights concerning their child's education and care. Research indicates that children with ASD whose caregiver have Limited English Proficiency often receive fewer hours of disability services and are less likely to have social and communication skills goals included on their Individualized Education Program (IEP). Therefore, it is crucial to thoroughly explain the diagnosis to caregivers, inform them of their child's rights, and explain how the school system can support them.



It is recommended that understanding these barriers is increased through research by conducting studies to improve collaboration between immigrants and healthcare practitioners. Additionally, immigrant community centers should be equipped with information and resources about autism. In places with high concentrations of immigrants or robust immigrant support, more resource centers must be accessible and contain this vital information.

**Mark Your Calendars! August COP Webinar**

The August Community of Practice webinar will be held on Wednesday, August 28th from 1:00PM - 2:30PM. The topic is "E-cigarettes and Tobacco Use in the Perinatal Period," presented by members of the MDHHS Tobacco Prevention and Control team: Farid J Shamo, MB ChB, MSc, MPH, Public Health Consultant, Epidemiologist & Program Evaluator and Grace Rudolph, MPH, Youth and Young Adult E-Cigarette Consultant.

[REGISTER HERE for the E-cigarettes and Tobacco Use webinar.](#)

**August is National Breastfeeding Month**

To help celebrate and promote National Breastfeeding Month, the U.S. Breastfeeding Committee (USBC) is making numerous resources available. [Check out this link](#) for information and advocacy support.



### **August is National Immunization Awareness Month!**

National Immunization Awareness Month (NIAM) is an annual observance held in August to highlight the importance of vaccination for people of all ages.



Together, we can help raise awareness about the importance of vaccination and staying up to date on vaccines, in order for families to protect themselves and their communities. CDC has a [website dedicated to NIAM](#), which provides a variety of resources to support vaccine education. Additionally, some key resources are highlighted below:

- [MIHP Immunization Toolkit](#)
- [MIHP MCIR Support and Guidance on Immunizations](#)
- [Vaccine Resources for Immigrants, Refugees, and Migrant Families](#)

## Room Sharing - Not Bed Sharing



It can be tempting for parents to share a bed with baby, but it can be unsafe. In Michigan, from 2010 to 2021, three in four (74.7%) sleep-related infant deaths occurred in an unsafe sleep place, such as an adult bed, couch or chair. In fact, about half (49.9%) occurred in an adult bed.\*

## Room Sharing - Not Bed Sharing

The American Academy of Pediatrics recommends room sharing with baby for at least the first 6 months. Room sharing means placing a sleep space just for baby, such as a crib, bassinet, or portable play yard, in the same room where parents or caregivers sleep, but separate from the parent or caregiver sleep space. Think “near my bed” instead of “in my bed.”

Room sharing allows parents to keep baby’s safe sleep space within view and reach from where they sleep. When parents room share, they can feed or comfort baby in their bed and put baby back into their own separate safe sleep space when the feeding or comforting is done.

Parents should **think about how tired they are when feeding or comforting baby**. If there is any chance they might fall asleep, they can make some changes to their environment to help reduce risks:

- **Avoid feeding and comforting baby on couches and armchairs.** Couches and armchairs can be very dangerous for baby, especially if adults fall asleep while feeding, comforting or bonding with baby on these surfaces. Couches and armchairs carry a very high risk for sleep-related deaths from entrapment and suffocation.
- **If baby is brought into the adult bed for feeding or comforting, remove all items and bedding from the area.** Pillows and soft comforters, quilts, pillows, and blankets in the adult bed put baby at risk for suffocation, strangulation, or entrapment if the adult falls asleep during feeding or comforting. When feeding or comforting is finished, put baby back in their sleep space.
- **Ask someone to stay with you or check on you.** The person can wake you up if you start to doze off or can put the baby in their separate sleep area if you fall asleep. If you don’t have someone to help you stay awake, set a timer to go off every few minutes to keep you awake.
- **If you fall asleep while feeding or comforting baby in your bed, place them on their back in their sleep space as soon as you wake up.** Evidence shows that the longer a parent and baby share the same bed, the greater the risk for sleep-related infant deaths.

Review the [Safe Sleep Steps](#) on what a safe sleep environment looks like and watch this [video](#) to learn more about planning for safe sleep.

\*Centers for Disease Control and Prevention (CDC) Sudden Unexpected Infant Death (SUID) Case Registry Project - 2010 to 2021, Michigan Public Health Institute, 2023.

Good night. Sleep tight. Sleep safe.

Learn more about the safest way for babies to sleep at [michigan.gov/safesleep](https://michigan.gov/safesleep)



### **Webinar: Preventing Adverse Childhood Experiences and Promoting Positive Childhood Experiences**

Join the Centers for Disease Control and Prevention (CDC) for a conversation about their understanding of evidence-based strategies to prevent adverse childhood experiences (ACEs) and promote positive childhood experiences (PCEs) as the new school year begins.

Following a discussion of evidence-based strategies for preventing ACEs and promoting PCEs by an expert at the CDC, the webinar will feature successful community-led efforts by leaders in the field. For public health, child welfare, and other youth-serving professionals, this webinar will highlight effective methods and tools to support your work promoting the well-being of children and youth in your communities.

**When:** Wednesday, August 14, 2024, 1:00 – 2:00 PM ET

**Register:** To secure your spot for this insightful discussion, please register at: <https://bit.ly/4dEyy4j>

Live interpretation provided in Spanish and ASL.

In the meantime, you can learn more about how communities can promote positive childhood experiences by watching the recording of our April 23 webinar: [“Thriving and Healthy Kids: We all have a role to play in promoting positive childhood experiences.”](#)

At this link, you can access the recording and also find a resource sheet in Arabic, English, Mandarin Chinese, and Spanish, “We Can All Make a Difference Together.”

Good night. Sleep tight. Sleep safe.

Learn more about the safest way for babies to sleep at [michigan.gov/safesleep](https://michigan.gov/safesleep)



## Infant Products Recalled



RH Baby & Child recalls Jeune French Contemporary Upholstered Panel Cribs due to choking hazard. Consumers should immediately stop using the recalled cribs. View the [recall](#) for more details on the hazards present and how to contact the manufacturer.

Papablic Infant Swings recalled due to suffocation hazard and violations of Federal Regulations for Infant Sleep Products. Consumers should immediately stop using the recalled swings. View the [recall](#) for more details on the hazards present and how to contact the manufacturer.



Travel Bassinet

Beberoad Love New Moon Travel Bassinets recalled due to fall hazard and violations of Federal Regulations for Infant Sleep Products. Consumers should immediately stop using the recalled bassinets. View the [recall](#) for more details on the hazards present and how to contact the manufacturer.

Good night. Sleep tight. Sleep safe.

Learn more about the safest way for babies to sleep at [michigan.gov/safesleep](http://michigan.gov/safesleep)





Michigan Department of Health & Human Services

**FOR IMMEDIATE RELEASE: Governor Whitmer declares August as Breastfeeding Month**  
**Press Release**

**FOR IMMEDIATE RELEASE:** Aug. 5, 2024

**CONTACT:** Lynn Sutfin, 517-241-2112, [Sutfin1@michigan.gov](mailto:Sutfin1@michigan.gov)

**Governor Whitmer declares August as Breastfeeding Month** Aug. 8-14 - *Indigenous Milk Medicine Week* Aug. 15-21-*Asian American, Native Hawaiian and Pacific Islander Breastfeeding Week* Aug. 25-31 - *Black Breastfeeding Week* Sept. 1-7 - *Workplace Lactation Week* Sept. 3-9 - *Latina/x Breastfeeding Week (Semana de La Lactancia Latina)*

LANSING, Mich. – Michigan is committed to encouraging a strong foundation for life by supporting breastfeeding/chestfeeding as not only a lifestyle choice, but a public health recommendation. As part of this effort, [Gov. Gretchen Whitmer is declaring August 2024 as Breastfeeding Month.](#)

“Michigan is committed to helping breastfeeding parents reach their goals through community-based support such as doulas and lactation consultants and peer counselors to help diversify support and increase breastfeeding rates in local communities across the state,” said Dr. Natasha Bagdasarian, MDHHS chief medical executive. “Breastfeeding can be beneficial to both babies and parents and protect babies against allergies, sickness and diseases like diabetes and certain cancers. We recognize that not all parents are able to breastfeed, and in those cases we offer resources to ensure that the nutritional needs of infants are met, and that parents feel supported.”

The American Academy of Pediatrics recommends breastfeeding/chestfeeding up to age 2 years and beyond. Breastmilk provides countless benefits to the infant including risk reduction of respiratory and ear infections, gastrointestinal tract infections, necrotizing enterocolitis, sudden infant death syndrome, asthma, atopic dermatitis, eczema, celiac disease, inflammatory bowel disease, obesity, Type 2 Diabetes and leukemia. It also reduces the incidence of breast and ovarian cancers, postpartum depression and cardiovascular disease for the lactating parent; conditions that disproportionately impact Black, Brown and Indigenous people.

Although 90% of Michigan families start breastfeeding/chestfeeding, [the difference between white non-Hispanic initiation \(91.3%\) and Black, non-Hispanic initiation \(81.6%\)](#) highlights the barriers that impact families of color.



Lack of support both in and out of the health care system, access of high quality, affordable childcare and the benefits of paid work leave decreases the number of people that start and continue breastfeeding their infants.

Michigan is taking action to remove barriers and increase support through several initiatives:

- Educating clinicians on the benefits of breastfeeding and the history of breastfeeding for Black women.
- Increasing access to breastfeeding support including WIC lactation support, doula-led breastfeeding training at the bedside, partnering and funding local/regional breastfeeding support entities, and Regional Perinatal Quality Collaborative mini grant funds issued to local breastfeeding providers.
- Increasing childcare access by increasing compensation of childcare providers and the number of providers.
- Requiring bias training for clinicians.
- Offering lactation training opportunities to clinicians and community-based organizations.

Michigan's Women, Infants and Children (WIC) program is celebrating National Breastfeeding Month with the theme, "WIC Supports [Superheroes.](#)" WIC assists breastfeeding/chestfeeding families in the following ways:

- Free, unlimited access to lactation consultants and breastfeeding peer counselors including telehealth, phone call or in-person appointment.
- Training to all WIC staff to support prenatal and breastfeeding/chestfeeding families.
- Lactating clients get more WIC foods, including canned fish, and are able to stay on the program longer.
- At 6 months, breastfed babies receive infant meats and more fruits and vegetables.
- WIC offers a breastfeeding warmline available seven days a week from 8 a.m. to 8 p.m. at 833-MIWICBF (833-649-4223).

For more information on events and happenings in Michigan for National Breastfeeding Month, visit the [Michigan Breastfeeding Network.](#)

- [2024 Breastfeeding Month NR.pdf](#)

**FOR IMMEDIATE RELEASE: MDHHS seeks applicants for Michigan Racial Health Equity Think Tank - Press Release**

**FOR IMMEDIATE RELEASE:** Aug. 6, 2024

**CONTACT:** Chelsea Wuth, 517-241-2112, [WuthC@michigan.gov](mailto:WuthC@michigan.gov)

**MDHHS seeks applicants for Michigan Racial Health Equity Think Tank** *New program created to improve Social Determinants of Health*

LANSING, Mich. – The Michigan Department of Health and Human Services (MDHHS) is seeking [applications](#) from Michigan residents interested in participating in the Michigan Racial Health Equity Think Tank (MiRHETT).

As part of the [Social Determinants of Health \(SDOH\) strategy](#), MiRHETT will better support the social care needs of marginalized and racially diverse Michigan residents. Through MiRHETT, a cross-disciplinary “Think Tank,” participants will collaborate and share knowledge from their unique backgrounds to address and improve disparity gaps for racial minorities. MiRHETT will provide additional insight to MDHHS on implementing recommendations from final reports of the [Black Leadership Advisory Council](#), [Michigan Coronavirus Racial Disparities Task Force](#), [Michigan Poverty Task Force](#) and the [Health Equity Plan](#).

“Improving social determinants of health requires continuous and collaborative support with engaged community partners throughout our state,” said Elizabeth Hertel, MDHHS director. “Innovative efforts like the Michigan Racial Equity Think Tank that work to find solutions to collaborate and improve the lives of our residents are necessary to make our state more equitable for all.”

Participants will join other public health and community leaders in virtual workshops including educational, coaching and think-tank style activities to improve health equity in Michigan. Eligible participants include, but are not limited to, community foundation members, MDHHS leadership, community leaders, community health specialists and epidemiologists with extensive expertise in racial and health equity. Individuals in the fields of philanthropy, health care, public health, social sciences, policy and/or community advocacy are encouraged to apply.

Applications to participate in the MiRHETT must be submitted by 11:59 p.m., Aug. 23. The program is expected to begin in September and continue through January 2025 with an estimated total commitment of 30 hours. Participants in MiRHETT will meet virtually beginning in August and participate in four brief foundational sessions. More information about MiRHETT and the application are available online [here](#).



### **Upcoming State of Michigan (SOM) Holidays**

September 2

November 5

November 11

November 28 and 29

December 24 and 25

December 31

### **Previously Released MIHP Updates**

To review any previously released MIHP Biweekly Updates, they can be found by [visiting the MIHP webpage Michigan.gov/MIHP](http://Michigan.gov/MIHP).

### **Biweekly Update Topic Submission**

If you have suggestions for topics to be addressed in future additions of the MIHP Biweekly Update, [please submit your ideas here](#).

### **MDHHS Publications**

[Sign up here to receive program updates and communications.](#)

### **Coordinator Directory**

Please click here to access the most recent Coordinator Directory. [MIHP Coordinator Directory](#)

Our communication for the Maternal Infant Health Program has been streamlined to a single email address and phone number. Please forward all emails to [MIHP@michigan.gov](mailto:MIHP@michigan.gov). For further assistance, contact the state office @ **1-833-MI4-MIHP (1-833-644-6447)**. Thank you.