

citymatch

City Lights

July 2014 | Vol 21 | No. 3

What's Inside:

CityLeaders: Providing Critical Leadership Training for 7 Years...And Counting.....	Page 4 - 5
Relaunched Tool Helps MCH Professionals Navigate Way.....	Page 6 - 7
U.S. Families Deserve Equity in Birth Outcomes.....	Page 8 - 9

Growing the Field: MCH Workforce & Leadership Development

CityView



Chad J. Abresch
CityMatCH Executive
Director and his
daughter Isla at
7-months

As the roles and responsibilities of public health professionals all around the country continue to evolve, I keep thinking to myself, 'what an exciting time to be a part of the Maternal and Child Health field.'

Every day, professionals are developing a better understanding of the health issues affecting women, children, and families in our communities, and are coming up with creative, informed ways to prevent disease and promote health.

While we all should be proud of the strides we've made as a field and the impact of our work, I believe that MCH experts and leaders NOW have a remarkable opportunity to embrace one of the most pressing needs of the MCH workforce; professional development.

In this issue of CityLights, we highlight CityMatCH leadership & workforce development tools, resources, and opportunities available to CityMatCH members, as well as other resources available to all MCH professionals.

Together, let's 'Grow the Field of MCH!' ■

All the best,

Chad J. Abresch, MEd
Executive Director
CityMatCH

CityMatCH Annual Board Meeting

CityMatCH staff and the Board of Directors came together March 19-21, in Chicago, Ill., for the annual Planning and Board Meeting. The Board reviewed the 2013 Strategic Work Plan and evaluated the year.

Staff and Board participated in learning sessions on Youth Violence Prevention and Forming Trauma Informed Communities.

Special thanks to those who presented at this year's meeting:

Rachel Davis, MSW

Managing Director
Prevention Institute

Catherine Fine, MPH

Director of the Division of Violence Prevention
Boston Public Health Commission

Cheryl Sharp, MSW, MWT

Senior Advisor
National Council for Behavioral Health

Howard Spivak, MD

Director of the Division of Violence Prevention
Centers for Disease Control and Prevention

Marlita White, LCSW

Director of the Office of Violence Prevention
Chicago Department of Public Health

MCHB Invested in MCH Workforce Development

Editorial by Laura Kavanagh, MPP

*Director, Division of MCH Workforce Development
Maternal and Child Health Bureau, Health Resources and
Services Administration*

The federal Maternal and Child Health Bureau (MCHB) is committed to developing and sustaining the MCH workforce with the skills needed to thrive in a rapidly changing health and public health environment. We know that supporting lifelong workforce development for future and practicing MCH professionals is critical to achieving optimal health outcomes for the maternal and child health population. MCHB supports graduate training programs to train the next generation of MCH leaders and supports the practicing workforce through a variety of investments.

One of MCHB's newest workforce development investments is the MCH Workforce Development Center—providing training, collaborative learning, coaching, and consultation to state and local MCH leaders and staff in four core areas around implementation of health reform: 1) access to care; 2) quality improvement; 3) systems integration; and 4) population health management (change management).

MCHB has particularly enjoyed working with CityMatCH members on many exciting MCH workforce initiatives over the years, including the CityLeaders program; development of the MCH Leadership Competencies; the MCH Navigator, a learning portal for maternal and child health professionals; and our recently released National Strategic Plan for the MCH Workforce Development Division. Our strategic goals are around 4 themes which I know are also of interest to CityMatCH: 1) MCH Workforce Development, 2) Diversity and Health Equity, 3) Interdisciplinary/ Interprofessional Training and Practice, and 4) Science, Innovation and Quality Improvement.

We'd love to stay in touch with you. If you'd like to receive updates from the Division of MCH Workforce Development, consider joining our MCH Training listserv or visit our recently updated web site, <http://www.mchb.hrsa.gov/training/>. We look forward to working closely with you as we face these challenging times together! ■

MCHB Workforce Development Investments:

- MCH Workforce Development Center
- MCH Leadership Competencies
- MCH Navigator
- National Strategic Plan for MCH Workforce Development Division
- Join the MCH Training Listserv by visiting <http://www.mchb.hrsa.gov/training/>.



CityLeaders: Providing Critical Leadership Training for 7 Years ... And Counting

CityMatCH's leadership training program, CityLeaders, provides emerging and mid-level MCH professionals a platform in which to grow their knowledge of the field, strengthen their skill sets, and reinforce their sense of purpose in carrying on the vision and mission of MCH.

Since 2007, 76 MCH professionals completed the intensive eight-month leadership training program. They engaged in a variety of activities and were paired with a mentor to gain new insights, new information, familiarity, and experience in 12 Core MCH Leadership Competencies. Participants developed a greater understanding of the knowledge, skills, and sense of purpose needed in order to lead themselves, others, and the wider community.

This April marked the completion of the CityMatCH's

"Clearly there is a great need in the MCH field for avenues of advanced learning like CityLeaders,"

Dr. Mark Law, CityMatCH Director of Operations

seventh year facilitating CityLeaders. The record number of applicants for CityLeaders year seven class indicates that the program has emerged as a prominent leadership training opportunity.

"We are pleased with the development of CityLeaders, and the growing interest in the program," said Dr. Mark Law, PhD, CityMatCH Director of Operations. "Clearly there is a great need in the MCH field for avenues of advanced learning like CityLeaders."

Results from post-competency assessments conducted from year one to year five, indicated a considerable increase in perceived skill level relating to the MCH Leadership Competencies (See Table 1).

CityLeaders continues to evolve with the completion of each class, as CityMatCH staff utilize all data and feedback to shape future classes.

"Not only does the data demonstrate CityLeaders' success, we are excited about the overwhelming amount of positive feedback from diverse groups of participants," Law said. "As a result, CityLeaders will continue to grow and have a positive impact on future cohorts of MCH leaders. We are just getting started."

CityLeaders year 8 will kick-off this upcoming September at the 2014 CityMatCH Leadership and MCH Epidemiology Conference in Phoenix, AZ. ■

TABLE 1

Year	Skill Level Pre-Program	Skill Level Post-Program
1	3.0 - 3.6	3.3 - 4.5
2	2.9 - 3.9	3.5 - 3.9
3	3.0 - 4.1	3.8 - 4.4
4	2.7 - 4.0	3.6 - 4.3
5	2.6 - 4.1	3.4 - 4.2

**5-point Likert Scale*



CityMatCH Leadership & Wellness Retreat

CityMatCH is committed to Leadership Development and Wellness for our staff. We would like to thank Grace Boda Principal Partner at the Center for Vital Partnership, for leading the CityMatCH Leadership and Wellness staff retreat at Camp Carol Joy Holling in Ashland, NE.

CityLeaders Shed Light on the Experience

Here are excerpts from CityLeaders participants' experiences. Learn more about becoming a CityLeaders Year 8 participant or mentor; or to read the full editorials from Tony Bondora, Liliann Paine, and Michael Dedee visit www.citymatch.org and click on the CityLeaders tab.



“ It became apparent early on in my career that simply identifying MCH issues in my county was insufficient and that I needed to be able to inspire and lead others to make positive change in a more active way. My CityLeaders experience was unforgettable, and it gave me the confidence I needed to grow as an MCH professional. This program gave me the leadership training that I didn't get through the county-level MCH and FIMR program.”

Editorial by Tony Bondora, MPH, Year 1 Participant

Fetal and Infant Mortality Review Coordinator

Alabama Baby Coalition Coordinator

Mobile County Health Department, Mobile Alabama



“ My mentor served as an excellent role model for me, displaying great character and humility. She helped me understand my strengths and how to manage my weaknesses as an emerging MCH Professional, as well as provided a real world context to my public health inquiries. Furthermore, I enjoyed engaging in dialogue with my CityLeaders cohorts about issues they face in their communities—throughout the entire program, but specifically during the CityMatCH Conference.”

Editorial by Lilliann Paine, MPH, Year 7 Participant

Program Coordinator | Regional Program Office

LifeCourse Initiatives for Healthy Families (LIHF)

Center for Urban Population Health

Milwaukee, WI



“ Experiencing the program from two different perspectives has helped me grow as a leader. Being a mentor helped me slow down, be more thorough in the transfer of knowledge, become a better communicator and teacher, and ensure the information is not only shared, but internalized for the protégée to be successful as well.”

Editorial by Michael Dedee, MSW, Year 3 Participant, Year 5 Mentor

Associate Director

Monroe County Department of Public Health

Rochester, N.Y.



“ Without reservation, I would recommend the program to emerging mid-level MCH leaders because the program is resource rich and offers a structured way to impart knowledge and share experiences toward leadership development.”

Editorial by Lesli P. Ahonkhai, MA, Year 7 Mentor

Assistant County Health Director

Florida Department of Health

Orange County, FL

Relaunched Tool Helps Navigate Way

It can be tricky to navigate a career field that is as vast, profound, and populated as the deep blue sea. When it comes to field of Maternal and Child Health (MCH), the newly relaunched MCH Navigator provides emerging and mid-level professionals with a continuous learning compass to help navigate towards professional development, and ultimately, towards improving the health and well-being of women, children, and families in their communities.

What's New

Trainings

During the first eight months of the 3-year cooperative agreement the Navigator team at Georgetown University (GU) worked to, 'find their sea legs' and standardize existing MCH Navigator trainings. The team inventoried material and retired old trainings; identified gaps in training and created project to fill those gaps; and bundled and condensed trainings.

"[MCH professionals] don't have time to go through tons of material looking for useful information," said John Richards, Georgetown University Research Directory. "That's what we are doing for them."

Data-base-driven Website

The newly launched data-base-driven website makes it easier for users to navigate the trainings and for the Navigator team to update content.

Richards said the MCH Navigator is not meant to be an exhaustive repository of MCH information, but rather a focused set of competency-based trainings that a Title V professional can access to further their knowledge of the field.

What's the Same

Users are still able to access learning opportunities through training bundles and spotlights such as MCH 101, Communication, Leadership and more; or by tailored learning through a downloadable self-assessment.

"We felt it was important for users to be able to access trainings in the same way, as well as access materials through new mechanisms such as our A-Z list, search page, and training briefs," Richards said.

Additional Training Spotlights

Some "Training Spotlights" are already available, but the Navigator team is working to grow this learning feature by adding additional topics for spotlights. It's a good vehicle for professionals who have very little time to explore and who learn better by viewing presentations, videos, and tutorials.

"One of the greatest strengths of the MCH Navigator is that it has a buy-in for everyone, at every level," Richards said. "We look forward to working with CityMatCH to develop local training spotlights."

An Online Self-assessment

By filling out a downloadable self-assessment users have always been able assess their strengths and needs; and map-out a learning pathway. The Navigator team is working on an online form that will populate a customized learning plan upon one's completion of the form.

"The original assessment only addressed skills, but the online assessment will address skills and knowledge," Richards said. "We are hoping to have this available by the end of summer."

MCH Navigator History

The Maternal and Child Health Bureau (MCHB) launched the MCH Navigator in 2010 as a game-changing online tool to address the professional development needs of the field. In July 2013, GU welcomed the MCH Navigator to a family of MCHB-funded projects that span the past 32 years.

“The MCH Navigator is the go-to resource for professionals in the field - whether they are at a community, state, or national level - for strengthening their knowledge of MCH,” said John Richards, Georgetown University Research Director. “We’re looking forward to working with CityMatCH to address the needs of city and county Title V staff.”

The Navigator Team at Georgetown University

The relaunch called on the Navigator team at GU to streamline the functionality and content of the MCH Navigator.

“Our team is focused and devoted to meeting the needs of a constantly evolving field.”

John Richards, MA, AITP
Project Lead

Rochelle Mayer, EdD
Content Expert

Sarah Riehl, MA
Communications Lead

Keisha Watson-Bah, PhD, MPH
Training Director

Beth DeFrancis, MLS
Training Coordinator

Tim King
Web Developer

Additional Features

MCH Alert – Weekly training, research, and news

Navigator e-News Update – Quarterly newsletter containing new features, spotlights, and learning opportunities

Social Media - Facebook, Twitter, LinkedIn

Webinar Calendar- Announcement of new MCH webinars

A-Z - An alphabetical, searchable index of all trainings

Question: How do I use the MCH Navigator?

Answer: Here are three ways to get started...

1 Know what you want to learn about?

Self-Directed

Quick-Finds

Find specific courses by using:

- Search Page (find by competency or keyword)
- A-Z Training List (all trainings and topics arranged alphabetically)

2 Looking for more structured learning?

Semi-Structured

Training Bundles

- MCH 101
- MCH Orientations
- Conceptual Models
- MCH Planning Cycle
- Communication
- Epidemiology
- Leadership
- Management

3 Not sure what your training need are?

Self-Assessment

Tailored Learning

- Use this tool to gauge your knowledge & skills across the MCH Leadership Competencies
- Develop a customized learning plan and receive strategies for lifelong learning

[Learn More](#)

U.S. Families Deserve Equity in Birth Outcomes

Wouldn't it be amazing if, in a major U.S. city ALL babies could celebrate their first birthdays?

In order for it to happen, there needs to be a shift in status quo.

National statistics indicate an overall Infant Mortality Rate (IMR) decline of 12 percent from 2005 to 2011—including a 16 percent decline for non-Hispanic Black women. It's a tremendous step in the right direction, but many communities, across the nation, still struggle with high IMR and a persistent inequity gap.

"Even if a city, with a high infant mortality rate, experienced a decrease similar to the national rate of decline, it's just not soon enough; U.S. families deserve better," said Chad Abresch, Executive Director at City**MatCH**. "There's a real opportunity for a major U.S. city to achieve equity in birth outcomes within the next 10 years."



National Institute for Equity in Birth Outcomes

First Cohort:

Baltimore, MD
Dayton, OH
San Francisco, CA
West Palm Beach, FL

Second Cohort:

Memphis, TN
Orlando, FL
Seattle, WA

City**MatCH** designed the Institute for Equity in Birth Outcomes to instill a scientific focus on public health strategies to reduce inequities in birth outcomes, and launched the first of two national cohorts in April 2013.

The initiative calls on City**MatCH** program coordinators and data personnel to lead participating communities through a Ready-Set-Go-Disseminate model; during which each community selects, implements, evaluates, and then shares findings of an equity in birth outcomes project.

First cohort communities completed the Ready phase in which they assess community readiness, form a community coalition, and gain a better understanding of data; and the Set Phase in which they select equity focused projects. Teams will implement and evaluate their projects during the Go Phase.

"We believe that this initiative will help us reach our landmark locally and the work will go beyond the two year grant" said Aline Armstrong, FIMR/SIDS Coordinator and San Francisco Co-Lead. "Through our effort and dedication we believe that our work will close the black and white gap, for birth outcomes. We hope our work can be a guide for other cities. Like Reverend Dr. Martin Luther King Jr. said, 'the time is always right, to do what is right.'" ■

Ohio, Opportunity for Equity

According to Ohio Vital Data Records in 2011, Ohio's overall IMR, 7.8 infant deaths per 1,000 live births, ranked #46 out of #50 states. Records indicate a sharp health disparity between Ohio's Black IMR and White IMR, 15.4 and 6.3 respectively. In 2011 Ohio ranked #44 for White IMR and #50 for Black IMR.

Ohio's historical best Black IMR, 13.9 deaths per 1,000 live births in 2012, is worse than the State's historical worst White IMR, 11.2 deaths per 1,000 live births in 1980.

"Unless there is a change in this trend, Black babies will wait until at least 2052 to experience the opportunity of surviving the first year of life, that White babies experience today," Arthur James, MD, Senior Policy Advisor at the Ohio Department of Health.

The Secretary's Advisory Committee on Infant Mortality (January 2013) indicates that Ohio's ability to prevent infant deaths and to address long-standing disparities in infant mortality rates between population groups is a barometer of State societal commitment to the health and well-being of all women, children, and families.

"Infant mortality is a social problem with clinical consequences," James said. "We are 25 years behind in

addressing the social determinants of health that affect African American infant mortality; Ohio can do better."

In 2013, CityMatCH and the Ohio Department of Health (ODH) set out to meet Ohio's birth outcome inequities head on with creative solutions.

They joined nine Ohio urban communities (teams) to launch the Ohio Institute for Equity in Birth Outcomes (OEI). Modeled after CityMatCH's National Institute for Equity in Birth Outcomes OEI is designed to strengthen the scientific-focus and evidence-base for realizing equity in birth outcomes.

The Ohio Institute for Equity in Birth Outcomes

Butler County
Canton-Stark County
Cincinnati
Cleveland-Cuyahoga County
Columbus
Dayton-Montgomery County
Summit County
Toledo-Lucas County
Youngstown-Mahoning County

Continued on Page 10

Detroit Launches Equity Institute

The Institute for Population Health; the Detroit Department of Health & Wellness Promotion; and the Detroit Regional Infant Mortality Reduction Task Force announced the launch of the Detroit Institute for Equity in Birth Outcomes (DEI), May 7 at the Charles H. Wright African American Museum in Detroit, MI.

The launch event included community discussion about infant mortality, and was followed by two days of workshops for DEI Participants.

CityMatCH will facilitate the 3-year initiative to advance equity in Detroit birth outcomes and reduce the city's overall high infant mortality rate.

"The work done here is helping to strengthen our collaborative approach and collective voice, which is already showing some promising outcomes. Through this more systematic approach we can eliminate inequities in Detroit birth outcomes and reduce the city's overall rate of infant mortality," said Dr. Kimberlydawn Wisdom, Sr. Vice President of Community Health and Equity at the Henry Ford Health System and Chairperson of the Detroit Regional Infant Mortality Reduction Task Force.



Spotlight: Ohio Institute for Equity In Birth Outcomes

Thursday,
April 10,
2014

JOURNAL-NEWS

Where a bigger newspaper means more local news ■ Online at Journal-News.com

\$1.00

BUTLER COUNTY

Funds to target infant deaths

Butler County one of
9 urban areas to get
money to reduce rate.

By **Hannah Poturalski**
Staff Writer

BUTLER COUNTY – A county-wide effort to reduce the local infant mortality rate just got a boost in funding.

Butler County is one of nine urban areas being represented in the Ohio Equity Institute – a partnership between the Ohio Department of Health and the national organization CityMatCH – with the goal of reducing Ohio’s high infant mortality rate.

The state has the third-highest infant-mortality rate in the nation, and ranks second among African-American babies.

Ohio’s infant mortality rate – the number of deaths per 1,000 births – was 7.7 in years 2006 to 2010, according to ODH. The rate in Butler County was 7.0 during that period.



Members of the Ohio Equity Institute (from left) Denise Pecha of CityMatCH, Monica Beltran of CityMatCH, Jennifer Bailer of Butler County Health Department and Keeli Cook of Ohio Department of Health, during a fundraising gala to reduce infant deaths.

Infant

continued from A1

Infant deaths can be caused by a range of social ills: poverty, unsafe homes, inattentive or drug-abusing parents, lack of prenatal care among them.

The U.S. Department of Health and Human Services has outlined a goal of reaching a 6.0 infant mortality rate by 2020, according to the Healthy People 2020 objectives.

The CareSource Foun-

Jamie Macklin, M.D., of Nationwide Children’s Hospital in Columbus, audited Ohio’s six children’s hospitals in September 2012. She found that cribs at the hospitals often held toys and blankets; that infants slept on their sides; and mattresses were too soft.

“Disastal,” was Macklin’s assessment. “We knew we had a lot of work to do.”

Babies should be sleeping on their backs, alone, and on a firm mattress with nothing else

the number of infant deaths that would not occur in a population if the risk factor were eliminated.

“Of course, we cannot control the actions of every person in Butler County, but this shows us the potential of what it could be,” Beltran said, and directs the community coalition to where their efforts should be targeted.

The Columbus Dispatch contributed to this report.

To view the entire article visit our
News Room at
www.citymatch.org and Keyword
Search Ohio Equity Institute.

Ohio, Opportunity for Equity (Continued)

“OEI is a unique collaborative opportunity to examine Ohio’s infant mortality issue at the community level and apply specific measurable interventions,” said Lisa Holloway, OEI Cincinnati Co-Lead & State Director of Program Services and Government Affairs March of Dimes Ohio Chapter.

“We are excited to have the technical leadership and vision of City**MatCH**, the support of the Ohio Department of Health, and the Ohio Collaborative to

Prevent Infant Mortality, as well as, nine committed teams led by health departments in counties where infant mortality persists.

Working together we strive to improve birth outcomes and save babies lives. We hope that our work will serve as a catalyst for other states struggling with inequalities in birth outcomes and position Ohio as a leader in reducing infant mortality.” ■



Kara Gehring

A seasoned project coordinator and effective communicator, Kara Gehring has a passion for uniting people and communities in working towards common goals; an aptitude for linking public health professionals to experts, training, and data; and an operational knowledge of implementing public health core functions and essential services. She has applied her skill set at organizations on the local, state, and federal levels.

Kara pursued a career in public health due to her desire to impact the health of large populations. She earned a B.A. in Global Health Studies at the University of Iowa and a Masters of Public Health in Community Health Education from the University of Nebraska Medical Center's College of Public Health. Leadership comes naturally to Kara. She founded and served as president of an active legacy program at UNMC called Bridge to Care, a refugee health education partnership in the Douglas County/Omaha Metro area. ■



Joe Sibilja



A talented, dedicated, and well-rounded communication professional, Joe Sibilja, has nearly a decade worth of experience helping organizations communicate more effectively. He's developed strategic communication plans, produced engaging marketing materials, garnered local and national media coverage, coordinated events of all sizes, and documented events through writing and photography.

Joe earned a BA in Journalism and Mass Communication from Creighton University in 2008. He joined the CityMatCH team in January 2014, and will coordinate and carry out CityMatCH's overall communication strategy. He looks forward to communicating the work of CityMatCH—to strengthen public health leaders and organizations to promote equity and improve the

health of urban women, families, and communities—and building relationships with CityMatCH members and partners. ■

Make the Most of Your CityMatCH Membership

For more than 25 years, CityMatCH has served as a link to professional growth opportunities, connecting emerging and mid-level MCH professionals to MCH experts, resources, and training opportunities. Here's a look at current professional development offerings available to all CityMatCH members:

Services:

- Distance Training Web-based Modules
- Ask-A-Colleague

Resources:

- MCH Life Course Toolbox
- Perinatal Periods of Risk (PPOR) Learning Network

Opportunities:

- CityLeaders
- Training Course in MCH EPI
- CityMatCH Conference

For more information about any of the CityMatCH professional development training tools and resources visit www.citymatch.org or contact Dr. Mark Law at mlaw@unmc.edu or Denise Pecha, at denise.pecha@unmc.edu.





CityMatCH
University of Nebraska Medical Center
Department of Pediatrics
982170 Nebraska Medical Center
Omaha, NE 68198-2170
402-552-9500 • citymch@unmc.edu
<http://www.citymatch.org>



www.facebook.com/CityMatCH



www.twitter.com/CityMCH



2014 Conference in Phoenix, Register Today!

Join us in sunny Phoenix, AZ, for the fully-integrated, content-rich 2014 CityMatCH Leadership & MCH Epidemiology Conference, Sept. 17-19.

Dr. Anthony Iton, Senior Vice President for Healthy Communities at the California Endowment, will be the conference keynote speaker. His primary focus includes health of disadvantaged populations and the contributions of race, class, wealth, education, geography, and employment to health status.

The conference will also feature symposiums from your peers on their work to advance MCH practice and epidemiology, and in-depth skills building and seminar workshops.

Registration is NOW OPEN.

Exhibitor and co-sponsor opportunities are available.

Learn more details about the conference by visiting www.citymatch.org.

CityMatCH Staff

Chad Abresch, MEd
Executive Director

Mark Law, MS, PhD
Director of Operations

Denise Pecha, LCSW
Director of Programs

Monica Beltran, MPH PH Project Coordinator

Maureen Fitzgerald, MPA Logistics Coordinator

Kara Gehring, MPH PH Project Coordinator

Carol Gilbert, Senior Health Data Analyst

Laurin Kasehagen Robinson, MA, PhD Senior CDC-Assigned MCH Epidemiologist

Allison Miles, MPH Health Data Analyst

Qinge Ouyang, MS System Support Specialist

Rebecca Ramsey, MPH PH Project Coordinator

Janet Rogers Office Manager

Erin O. Schneider, MSW Senior Project Coordinator

Joe Sibilia, BA Public Health Communication Specialist

Jessica F. C. Thompson, MPH (c) PH Project Coordinator

Roy Williams, Jr. Student

Regan Johnson Student

CityLights Editors:

Joe Sibilia, BA
Public Health Communication Specialist

CityLights is supported in part by Grant #G97MC04442-04-00 from the Maternal and Child Health Bureau (Title V, Social Security Act), Health Resources and Services Administration, Department of Health and Human Services