

## Women/Maternal Health – Objective 1.3 Prenatal Education and Support Services Initiatives

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### REPORT – October 2021 through September 2022

**Kansas Perinatal Community Collaboratives / Becoming a Mom:** With proven success, Kansas MCH remains committed to supporting the expansion and sustainability of the [KPCC initiative](#), providing training and technical assistance on community collaborative development and MCH program integration targeted at reaching a greater disparity population, and integrating additional services and support mechanisms for populations at greatest risk. KDHE's Title V commitment to this model is greater than just increasing the number of KPCCs across the state, or programs who implement the BaM program. Rather it is our desire to support the model by strengthening the perinatal collaborations within the local communities, as well as growing the programs and initiatives they implement in response to their local data identifying areas of needed focus. Much work was done throughout this reporting period to help reinvigorate collaborative efforts that suffered greatly during the pandemic. Fallout from the pandemic not only left local coalitions/collaboratives struggling to reengage partners, it left many programs understaffed and in mere survival mode. The P/I Consultant work shifted focus from plans of expansion to plans for rebuilding, stabilizing and rallying existing programs. This work included a month-long tour across the state visiting twenty-two local programs during August 2022. These visits were warmly welcomed by locals, and deemed a tremendous success, with passion and energy for the work reignited on both sides (KDHE and local). Common themes, key take-aways and actionable items were compiled following the visits and shared with our Children and Families Section. Input gleaned during these visits also helped to shape the focus of presentations already being planned for the November 2022 in-person BaM/KPCC Conference. Conference planning included one day of content focused on BaM program updates and expansions, with the second day focused on KPCC model strengthening and expansion. To view a map of existing sites and implementation progress, visit the [KPCC Participating Communities](#) webpage.

Data from the 2020-2021 BaM Aggregate State Report highlights the program's reach of disparity populations (see [BaM Infographic](#)), which is a target of Kansas Title V services. According to the report, mothers receiving education through the BaM prenatal education program were more likely than other mothers giving birth in the state to be racial/ethnic minorities; younger; lower education level; enrolled in WIC; and covered by non-private insurance. The education sessions and associated activities are aimed at improving pregnancy health and infant health outcomes for all Kansas mothers but are particularly targeted at disparity populations. Interestingly, with implementation of virtual sessions during the pandemic, the number of higher educated and privately insured participants has grown drastically, shifting the demographics of the population served in 2021.

Since inception in 2010, KPCCs have been a driving force behind improving birth outcomes in Kansas. In two of the longest running sites, infant mortality has decreased from pre-implementation to post-implementation. The Geary County infant mortality rate has decreased significantly from 11.9 infant deaths per 1,000 live births in 2005-2009, to 5.7 in 2017-2021. The Saline County infant mortality rate has decreased from 9.0 infant deaths per 1,000 live births in 2005-2009, to 5.9 in 2017-2021.

Infant Mortality Rate (Deaths per 1,000 live births)	Geary Collaborative (established July 2012)	Saline Collaborative (established Jan 2010)
2005-2009	11.9 (8.6-16.0)	9.0 (6.3-12.3)
2017-2021	5.7 (3.8-8.3)	5.9 (3.6-9.2)

Source: KDHE Bureau of Epidemiology and Public Health Informatics, Kansas birth and infant death data (resident)

*KPCC/BaM Websites:* Resources for regional and statewide implementation of KPCCs have been under development over the past several years to ensure both growth and sustainability of the initiative. The [KPCC website](#) serves as an access point to introductory information about the initiative. Updates to the site were made during this reporting period, however the full website redesign and expansion is still under development. [KPCC and BaM infographics](#), accessed from the KPCC website, were developed to aid communication and recruitment for new communities and are updated annually.

New training and implementation resources were added to the existing KPCC partner-only website during FFY2022. Upon release of the 2021 updated BaM curriculum by March of Dimes (MOD) in Spring of 2022, all curriculum handouts were reviewed, and updates were made to Kansas supplemental handouts, including updated MOD, MWS and COVID-19 handouts. These handouts were posted to the website in July 2022 and work has been underway since then to coordinate mass printing of the updated curriculum for all Kansas program sites. Work has also been in progress to fully align English and Spanish curriculum resources to assure equivalent supplemental resources are available in Spanish. Session PowerPoints, lesson plans and activity plans were updated in June and July 2022 and will be posted to the website for implementation January 1, 2023, following addition of content and resources requested by local sites during the Aug. 2022 site visits.

While virtual prenatal education became a necessary option during the COVID-19 pandemic, evaluation efforts and anecdotal evidence has supported its continuation as a mainstay option in most communities. While resources and guidance documents for virtual implementation, including online data collection and [guidance for virtual screening for PMADs](#), were developed and disseminated during 2021, resources continue to be built upon to this current date. This infrastructure component is continuing to be improved, supported and grown, to reach populations where programming and services are not currently available locally.

## PLAN – October 2023 through September 2024

***Kansas Perinatal Community Collaboratives / Becoming a Mom:*** Title V is heavily invested and committed to expansion of the [Kansas Perinatal Community Collaboratives \(KPCC\) model](#). This includes the desire to spread to new communities across Kansas, while continuing to remain focused on strengthening the model, targeting and reaching disparity populations, and integrating additional services and support mechanisms for populations at greatest risk. In recent years, the model has organically scaled to include preconception care through pregnancy. In one community, this is being scaled even farther by integration of the early childhood system. Early discussions are occurring for utilizing this model as the foundational framework and basis for the implementation of Help Me Grow across Kansas. This would support a preconception through early childhood (up to age 8), possibly setting the stage for long-term planning on a life course approach to this model.

Based off 2021 BaM State Aggregate Report data and recommendations, as well as BaM/KPCC site input gathered during August 2022 site visits, FY24 work and expansion plans will focus on reaching greater disparity populations. This work will include Title V investments in two key areas:

- Curriculum adaptations/development for use across other ATL program models, service settings and with special populations (I.e. virtual format, low-literacy and non-English speaking immigrant populations, tribal communities, etc.).
- Health Equity Opportunity Projects (HEOP) slated for July 2023 – June 2024.

A Request for Proposals for the HEOP was provided to BaM/KPCC sites in January 2023, with a March 15<sup>th</sup> submission deadline. Sites were provided guidance on the inclusion of project plans seeking to improve local (and/or state) maternal/perinatal health outcomes, through targeted interventions aiming to reach high-risk disparity populations as well as women identified as high-risk due to chronic health conditions or pregnancy complications. Title V Women/Maternal, Perinatal/Infant and Behavioral Health Consultants will work together, in collaboration with other state partners, to provide TA throughout the project period.

**Strengthening Your Local Health Equity Efforts:  
Kansas Perinatal Community Collaboratives (KPCC)  
Becoming a Mom® (BaM) Health Equity Opportunity Project  
2023 Request for Applications (RFA)**



**Vision: Equal opportunities for all Kansas perinatal individuals and their infants to be healthy.**

*This opportunity will fund up to five Kansas communities at up to \$10,000 each to support a KPCC/BaM health equity initiative between July 2023 – July 2024. Anticipated project timeline includes:*

- *November 2022 – February 2023 – Partner convening, planning and request for project applications*
- *March 15, 2023 – Application submission deadline*
- *May 1, 2023 – Notification of award*
- *July 1, 2023 – Start of KPCC Health Equity Opportunity Project*
- *July 2023 (TBD) – Project Kick-Off Meeting (first quarterly check-in meeting)*
- *October 2023 (TBD) – Second quarterly check-in meeting*
- *January 2024 (TBD) – Third quarterly check-in meeting*
- *January 15, 2023 – Mid-year progress report submission deadline*
- *April 2024 (TBD) – Final quarterly check-in meeting*
- *June 30, 2023 – Year-end progress report submission deadline*

**Instructions:** This RFA is intended to support local perinatal community collaborative efforts to assure equal opportunities for all perinatal individuals and their infants to be healthy. This RFA provides guidance and space for you to describe how your organization and partners intend to strengthen local efforts to assure equal opportunities for perinatal populations regardless of race/ethnicity, income, education, age, or where people live.

Your proposed project could begin a new effort or strengthen equity aspects of an existing effort. The issue addressed should focus on equity aspects of perinatal health that are intended to improve maternal and infant health outcomes.

For your application, please describe proposed activities. For technical support in preparing your application, please use the online [Kansas Healthy Communities Action Toolkit](#). Quarterly check-in meetings will be facilitated by KDHE Clinical Perinatal-Infant Health Consulting and applicable team members to help support planning and development aspects of successful applicants' projects.

As indicated above, FY2024 work and expansion plans, will also focus on providing TA to local community partners interested in strengthening their existing KPCC collaborations. Lessons learned from this work will

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help to inform development of a continued expansion approach where communities are identified as high need, based off maternal/perinatal and infant health indicators. These communities will be solicited to engage in KPCC development activities, with the support of KDHE Title V provided guidance and TA.

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**Local MCH Agencies:**

- Crawford County Health Department will increase their Becoming a Mom (BaM) class participation by 10% from a baseline of 96 participants in 2021. BaM is known locally as Healthy Beginnings. They currently collaborate with other Health Department Programs, Via Christi Hospital, and local physicians to gain referrals, and will begin working with the WIC program to further increase promotion and referral.
- Delivering Change will increase their BaM participation by 10% for a total of 60 participants in the coming year. Their navigators are embedded in a local OB/GYN clinic where they will provide prenatal education and enrollment into BaM. BaM will be offered at least every 8 weeks and be facilitated by Delivering Change and other community agencies that serve the prenatal community. BaM serves as an introduction and relationship builder between the participants and community agencies that facilitate the various class sessions.
- Riley County Health Department will offer Bam in a hybrid (virtual and in-person) format to increase participation by 10%. Between July 1 and December 30, 2022, 72 people participated in BaM. It is estimated that a 10% increase would result in 158 participants in the coming program year. Some activities that will be implemented to increase reach include holding two classes a year on Saturdays, conducting classes virtually and in-person, facilitation of enrollment via a navigator placed at The Women's Health Group, and a radio advertisement to marketed to the demographic of focus.
- Saline County Health Department will expand their Kansas Perinatal Community Collaborative (KPCC) partnerships to achieve increased participation in BaM classes. Last year, they began outreach to McPherson County partners to increase BaM participation among McPherson County residents. There isn't a Block Grant-funded MCH program in McPherson County, so this expansion fills a need in the region. This year they plan to expand partnerships to Republic County and offer virtual BaM classes to residents there. In addition, they will engage Salina Regional Health Center Birth Unit Director to facilitate Session 3 (Labor and Delivery) of BaM.
- University of Kansas School of Medicine-Wichita will provide Baby Talk classes to 350 participants from Sedgwick County which is an increase of 11% from baseline. In addition, they will have 30 participants from neighboring Harvey County, and 30 from other neighboring counties that don't offer BaM. To achieve this, they will promote they will promote their BaM classes, known locally as Baby Talk, through community outreach events and referrals made by their home visitor that is embedded in the Wesley Women's Care Clinic.

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