



# KITSAP MATERNAL AND INFANT HEALTH FORUM

## SUMMARY REPORT

### Hosted in partnership by:

Kitsap Public Health District, Kitsap County, and Virginia Mason Franciscan Health

## INTRODUCTION

**On July 20, 2023, Kitsap Public Health District, in partnership with Kitsap County and Virginia Mason Franciscan Health, hosted the Kitsap Maternal Infant Health Forum at the Marvin Williams Center in Bremerton, Wash.**

The goal of the forum was to foster collaboration, inspire knowledge exchange, and most importantly, share innovative solutions for protecting and improving the health of people who give birth and their infants in Kitsap County.

Of the 190 individuals invited from community, the forum drew 90 attendees representing 44 organizations. Participants ranged from local healthcare and mental health professionals to parents and policymakers. The forum was structured around five main elements: community gathering time, video storytelling, a multidisciplinary panel session, focused tabletop discussions, and time to review data on Kitsap trends in maternal and infant health.

## BACKGROUND AND TRENDS

**The Kitsap Maternal and Infant Health Forum joined a series of community discussions taking place across Washington state facilitated by the Washington State Department of Health.** These conversations stemmed from the recent Washington State Maternal Mortality Review Panel report to the state Legislature.

Scan this code to view  
a video presentation  
summarizing the  
forum, or go to:



[vimeo.com/kitsappublichealth/mih](https://vimeo.com/kitsappublichealth/mih)

The Maternal Mortality report found that from 2014-2020, there were 224 pregnancy-associated deaths (deaths that occurred during pregnancy or within one year following a pregnancy) and 97 pregnancy-related deaths (deaths caused by or linked to pregnancy complications) statewide. Of the 97 pregnancy-related deaths, the panel found that 80% of deaths were preventable. The leading underlying causes of pregnancy-related deaths were behavioral health conditions.

In Kitsap County, many organizations have been working to understand and address concerning trends in maternal and infant health. For example, the percentage of Kitsap residents receiving adequate prenatal care during pregnancy has declined since 2016. Almost half (48%) of Kitsap residents who gave birth in 2021 did not receive adequate prenatal care, compared with 30% of Washington residents.

Factors affecting maternal health access include bias and discrimination, lack of screening, continuity of care, or access to health care and behavioral health treatment. More so, significant progress must be made to ensure maternal and infant health outcomes are improved for Black and Indigenous communities, the populations bearing the poorest health outcomes and greatest risk factors.

## THE FORUM EXPERIENCE



Storytelling was an overarching theme for the forum. This included a video featuring new Kitsap parents sharing personal stories related to maternal and infant health. The forum was structured around explored five main activities: community gathering time, video storytelling, a multidisciplinary panel session, focused tabletop discussions, as well as opportunities to review data regarding Kitsap County trends in maternal and infant health.

## HIGHLIGHTS FROM THE PANEL

The forum featured six panelists representing the Washington State Department of Health, Kitsap Public Health District, Suquamish Tribe, Kitsap Mental Health Services, Kitsap OBGYN, and the Birthing Center at St. Michael Medical Center.\*

### Each panelist answered two main questions:

- What do you think are the largest challenges and obstacles to improving maternal and infant health?
- What solutions would you propose?

### These quotes highlight key insights from the multidisciplinary panel:

#### **Katie Eilers, Washington State Department of Health:**

*"...investing in community led solutions. Communities who experience disparate outcomes have the expertise and cultural knowledge to influence improving of care and experiences and we want to invest what their decisions are."*

#### **Dr. Gib Morrow, Kitsap Public Health District:**

*"... Those of us who are working as caregivers from different health systems need to see themselves as collaborators, rather than competitors, in this community-based mission to get our moms the most appropriate care throughout pregnancy and well into infancy."*

#### **Amber Winemiller, Suquamish Tribe WIC:**

*"...Replenishing the workforce here, the labor force and healthcare providers is obviously huge... Knowledge is power and an empowered person will feel more comfortable and will be more likely to seek the care that they need."*



To view a recording of the full panel discussion, scan this code or go to:

[vimeo.com/kitsappublichealth/maternalhealth](https://vimeo.com/kitsappublichealth/maternalhealth)

*\*It was noted by forum participants that having a doula or midwife representative on the panel would have been beneficial. This recommendation will be carried forward.*

## FOCUSED TABLETOP DISCUSSIONS

Tabletop discussions gave participants the opportunity to listen, reflect, center stories and describe the types of solutions necessary to turn the curve on maternal and infant health trends in Kitsap County.

Prior to the event, participants selected which table topic they were most interested in exploring at the nexus of maternal and infant health. Each table represented a significant area of focus building from the Washington State Maternal Mortality Review Panel priority policy and funding recommendations.

These identified priority areas are:

- **Undo racism and bias:** Address racism, discrimination, bias, and stigma in perinatal care
- **Address mental health and substance use disorder:** Increase access to mental health and substance use disorder prevention, screening, and treatment for pregnant and parenting people
- **Enhance health care quality and access:** Expand equitable and high-quality health care by improving care integration, expanding telehealth services, and increasing reimbursement
- **Strengthen clinical care:** Build on the quality and availability of perinatal clinical and emergency care that is comprehensive, coordinated, culturally appropriate, and adequately staffed
- **Meet basic human needs:** Identify and secure the necessities of pregnant and parenting people by prioritizing access to housing, nutrition, income, transportation, childcare, care navigation, and culturally relevant support services
- **Address and prevent violence:** Put a stop to violence in the perinatal period through survivor-centered and culturally appropriate coordinated services

Workforce and recruitment were also added as a focus topic area in recognition of hardships regarding a stressed and insufficient workforce in Kitsap County.

## RECOMMENDATIONS & RELATED ACTIVITIES

Forum participants generated an abundance (294 Post-it notes) of place-based solutions to be acted on by a diverse set of partners in Kitsap County to improve maternal and infant health trends across the County. The most common recommendations and related activities that emerged from the forum include:

### **Collaboration (N = 57, 19%)**

- Create a workgroup where providers can build relationships, address challenges, and collaborate.
- Utilize different levels of health care to address maternal health gaps including midwives, doulas, and nurses.
- Embed additional services in prenatal and postnatal care like mental health, substance use treatment, and support services.

### **Holistic, Cultural, and Client-Centered Care (N = 50, 17%)**

- Expand maternal health to include additional support for mental health, parenting education, postpartum care, and connections to resources.
- Expand home visit programs.
- Disrupt the traditional care model by using a client-centered approach to prenatal and postnatal care.

### **Training (N = 34, 12%)**

- Conduct implicit bias, racism, cultural competence training with staff.
- Increase knowledge on mental health, substance use disorders including screenings, warning signs, and combating stigma.



**Accessible Mental Health and Substance Use Disorder Services (N = 32, 11%)**

- Create a group therapy program for those planning to or have recently given birth.
- Reduce barriers by embedding mental health services in existing structures in our community.
- Eliminate stigma of the use of mental health and substance use disorder services during and after pregnancy.

**Cultural Competency (N = 27, 9%)**

- Train providers and implement use of plain language.
- Promote the incorporation of traditional/cultural practices into prenatal and postnatal care.

Additional recommendations relate to supporting the health care workforce, enhanced care coordination, and addressing systemic challenges such as innovative payment and reimbursement structures within the healthcare delivery system.

**More examples include:**

- Utilize providers other than OB/GYN to provide maternal care (N = 26, 9%)
- Centralized services (N = 25, 9%)
- Accessible facilities (telehealth, home visits, mobile clinics, etc.) (N = 23, 8%)
- Support healthcare workforce (N = 20, 7%)
- Recruitment of workers to medical field (N = 19, 6%)
- Increase number of facilities and providers (N = 17, 6%)
- Diverse recruitment (N = 14, 5%)
- Workgroup/community of practice (N = 14, 5%)
- Reimbursement (N = 13, 4%)
- Community outreach (N = 13, 4%)
- Additional data/research (N = 12, 4%)
- Warm hand-offs to services (N = 12, 4%)
- Address accessibility issues (language, transportation, cost) (N = 10, 3%)
- Care coordination - community health workers and case management (N = 10, 3%)



- Increase housing availability (N = 10, 3%)
- Change eligibility requirements of services (N = 9, 3%)
- Consolidated list of resources (N = 9, 3%)
- Support legislation (N = 3, 1%)
- Health education (N = 2, 1%)

**CONCLUSION**

**The Kitsap Maternal and Infant Health Forum provided a unique environment for local healthcare, mental health professionals, new parents, community advocates and policymakers to gather and co-create solutions.**

The recommendations and activities summarized in this report provide a sample blueprint for the ways in which community partners can (1) strengthen ongoing efforts that increase maternal health and (2) implement new endeavors to increase maternal and infant wellness outcomes in Kitsap County that inspire a community of practice.



## ACKNOWLEDGEMENTS



Thank you to all the amazing Kitsap Maternal and Infant Health Forum participants, who represented 43 Kitsap organizations!

Agape Unlimited  
 Bremerton Housing Authority  
 City of Bremerton, Mayor's Office  
 Community Leadership  
 Doulas in Kitsap County  
 Easterseals Washington Kitsap County Parent Coalition  
 Holly Ridge Center  
 Kitsap Community Resources  
 Kitsap Breastfeeding Coalition  
 Kitsap County Mental Health, Chemical Dependency, and Therapeutic Drug Court Community Advisory Committee  
 Kitsap Mental Health Services  
 Kitsap Parent Child Assistance Program  
 Kitsap Pediatricians  
 Kitsap Public Health District  
 Kitsap OBGYN  
 Kitsap Strong  
 League of Women Voters  
 MultiCare  
 Naval Hospital Bremerton  
 Nurse Marine Corps  
 Nurturing Expressions  
 Office of the Governor, Public Health  
 Olympic College Nursing Faculty  
 Olympic Community of Health  
 Olympic Educational Service District 114  
 Local parents from Kitsap County  
 Peninsula Community Health Services  
 Peninsula Early Childhood Coalition

Rep. Derek Kilmer's Office  
 Sen. Emily Randall's Office  
 Suquamish Tribe  
 True North Birth Center  
 University of Washington  
 Virginia Mason Franciscan Health St. Michael Medical Center leadership  
 Virginia Mason Franciscan Health Community Health  
 Virginia Mason Franciscan Health Family Practice Residency Program  
 Virginia Mason Franciscan Health St. Michael Medical Center Family Birth Center  
 Virginia Mason Franciscan Health Social Work program  
 Washington State Department of Children, Youth, and Families  
 Washington State Department of Health  
 Washington Health Care Authority  
 Washington State Parent Ambassadors  
 YWCA Kitsap

## SOURCES

- <sup>1,3</sup> [Washington State Maternal Mortality Review Panel: Maternal Deaths 2017-2020](#)
- <sup>2</sup> [Kitsap Public Health District Adequate Prenatal Care Dashboard](#), based on data from the Washington State Department of Health data and the American College of Obstetricians and Gynecologists "Adequacy of Prenatal Care Utilization" scale



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[\*\*kitsappublichealth.org/data\*\*](https://kitsappublichealth.org/data)