

MHI Tribal Listening Sessions Summary

Maternal Health Innovations (MHI)

The Perinatal Program at the Department of Health partnered with the American Indian Health Commission to hold two listening sessions for tribes and tribal organizations to inform how the DOH can invest in existing and emerging tribal strategic priorities for mothers, infants, and health during and after pregnancy. We recently received the Maternal Health Innovations (MHI) Grant from the Health Resources & Services Administration (HRSA).

This grant has 3 goals:

1. Identify strategic priorities (existing or new) for the next 5-years to improve maternal health in Washington state.
2. Enhance perinatal health data capacity and products.
3. Increase implementation of strategies that address maternal health disparities.

Through the MHI grant, we have the opportunity to invest in tribal led maternal and infant health priorities. The listening session will help shape funding opportunities for strategic planning efforts to improve maternal health in tribal communities.

Tribal Listening Sessions

The listening sessions, held on July 16th and September 5th, 2024, highlighted the importance of supporting traditional practices, health related social needs (HRSNs), and centering tribal communities.

Themes identified:

- Centralizing tribal and urban native communities in policy development and program implementation to provide a more coordinated effort towards indigenous birth justice.
 - Investing in a workforce that is effective for tribal and native communities. This includes moving towards utilizing tribal doulas and midwives as well as utilizing tribal colleges to build out training programs to sustain the workforce.
 - Implementing indigenous birthing and breastfeeding education courses with the understanding of historical trauma and northwest traditions and practices.
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- Encouraging home births and supporting indigenous birthing centers that are free of structural racism while also investing in cultural humility trainings for providers to address microaggressions and racism.
- Increasing family and postpartum supports by utilizing community gatherings and traditional practices to build community and improving access to nurse home visiting and lactation support.
- Expanding access to indigenous prenatal and postpartum mental health providers to address history of birth trauma and access to care for pregnant and parenting persons in need of inpatient services.

For questions and comments, please reach out to:

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