

Lori Cooper

863-2458

—

DRAFT

**FIRST LADY HILLARY RODHAM CLINTON
VIDEOTAPED REMARKS FOR HEALTHY MOTHERS, HEALTHY BABIES
NATIONAL BIENNIAL CONFERENCE
SEPTEMBER 18, 1995**

I am honored to be able to speak to such a dedicated group and I am sorry that I cannot be with you in person. Like many of you, I am deeply concerned about the quality of prenatal and preventive care mothers and their children receive. Access to medical care and child-care education should not be a luxury in our society. There are already enough dangers awaiting our children outside the home. It is essential that they be given the best of care, that those formative years offer them the potential for healthy lives in healthy families.

With that in mind, I want to thank you for your efforts to promote health education and awareness throughout our country. At a time when funding for programs is increasingly competitive, health care providers, administrators, educators, policy-makers, families and community leaders must find ways to join together to get basic health services to women and their children.

Over the past fifteen years, Healthy Mothers, Healthy Babies coalitions at the state and local levels have demonstrated a variety of ways in which prenatal care can be made more accessible for the many underserved communities whose high rates of infant mortality can and must be reduced.

We know that a nation cannot realize its full potential unless its people are healthy. We need to reinforce our commitment in the United States to the health of babies and women throughout their lifetimes. We are making progress on immunizations and I'm glad of that.

still,
We must do more to make primary and preventive care a priority in the health care system. We know it is cost-effective, because it reduces the need for more expensive treatment at a later date.

Outreach workers are also a critical component of the health care delivery team at the grassroots level. I know your organization is committed to building a national network and voice to recognize and support the importance of promoting prenatal care.

Getting services to the people who need them most is crucial to improving the health of many women and children in underserved areas. Your charge at this conference is to take the ideas and skills you have shared back to your communities. *and to help*

device was to improve health ###

Services for those most in need. It is a difficult task, but a vital one. And I'm confident that with your wisdom, energy and talent, you will make a difference in the lives of women & children throughout

We know that health is a
by productive free society, depend

We know that a nation cannot ~~be~~ realize its full potential unless its people are healthy. We need to reinforce our commitment to the United States to the health of babies and women throughout their lifetimes.

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We are making progress on immunizations and I'm glad that

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I am honored to be able to speak on behalf of such a dedicated group of individuals and am sorry that I cannot be there in person. I am deeply concerned about the quality of prenatal and preventive care mothers and their children receive. Access to medical care and child-care education should not be a luxury in our society; it is necessity. There are already enough dangers awaiting our young children outside the home; it is essential that they be given the best of care, that those formative years offer them the potential for healthy lives in healthy families.

With that in mind, I want to thank you for

I am heartened by your efforts to promote ^{health} education and public awareness throughout our society. Though individual initiative is the first step toward any social action, it is through the collaboration of forces that real progress is achieved. At a time when funding for programs is increasingly competitive, collaborative efforts among health care providers, administrators, educators, policy-makers, families and community leaders can strengthen the ability of each discipline to effectively provide health services needed for women and children, especially in underserved populations. Creating and sustaining systems which support such cooperative efforts should be a priority at the national, state and local level. Over the past fifteen years, Healthy Mothers, Healthy Babies coalitions at the state and local levels have demonstrated a variety of ways in which prenatal care can be made more accessible for the many underserved communities and communities of color whose high rates of infant mortality can and must be reduced.

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Preventive care should continue with well-child care including immunizations, nutrition counselling and assessment to ensure a child's ability to enter school physically ready to learn. HMHB Immunization Education and Action Committee has worked closely with the President's Infant Immunization Initiative toward this end, alerting the public and providers of the importance of immunizing every child by age two.

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Primary and preventive care is cost-effective, because it reduces the need for more expensive treatment at a later date, when mothers and babies are already affected by illness and injury. When provided as part of a comprehensive health care plan including education, diagnosis and screening and referral, prenatal care is an effective tool for health care professionals of all disciplines to improve pregnancy outcome and the health of families.

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to support ^{the} ~~their~~ work ^{you do} and recognize ^{the importance of} ~~their value in promoting~~ prenatal care.

Getting services to the people who need them most is crucial to improve the health of many women & children in underserved areas.

~~You are charged~~

Your charge at this conference is to (see talk pts below #)



healthy mothers, healthy babies coalition

Healthy Mothers, Healthy Babies Coalition

FACSIMILE FORM

Date: 9/15/95
 To: Sabrina
 Company: Office of the First Lady
 Fax #: 202-456-5709 Phone #: _____

From: Leslie Dunne, Program Associate
 Fax #: (202) 484-5107 Phone #: (202) 863-2458

Re: HMHB Conference

Message:

Thank you for considering this small addition to our video. (See page 2 - in bold). We feel the Achievement Awards are a natural and positive progression of the goals and mission of the organization, since the recipients model the very collaboration we support.

Reply:

Hard copy sent: YES NO

Talking Points for Hillary Clinton
Healthy Mothers, Healthy Babies Coalition

National Educational Conference
October 13-15, 1995

Promoting Prenatal Care: Strengthening Linkages and Empowering Communities

Background

- Healthy Mothers, Healthy Babies at the national level fosters collaboration and provides a forum for information exchange among community, state and federal leaders and advocates for families through ongoing communication with MCH professionals across the U.S. This eighth biennial educational conference brings together colleagues from diverse disciplines and perspectives to explore cross-cutting maternal and child health issues and learn practical responses to the needs in their communities. HMHB is supported by both public and private funds: government funders include the Maternal and Child Health Bureau, the Centers for Disease Control and Prevention, the Health Care Financing Administration and the Department of Agriculture.

- This year's theme of promoting prenatal care through strengthening linkages and empowering communities will be realized through five plenaries which focus on key components of the health care system. LEADERSHIP (Plenary I) will look at the federal perspective on where we are with promoting prenatal care--this includes Mrs. Clinton's remarks and will be followed by a representative from the federal government (Secretary Shalala invited) who will discuss the status of prenatal care in the U.S.; MEDIA (Plenary II) will look at the power of the media to influence public (health) policy and the power of the conference participants to influence the media; CONSUMERS (Plenary III) will examine the role unintended pregnancies have on poor pregnancy outcome; PROVIDERS (Plenary IV) will look at the role of one provider, the hospital. A panel presentation will address the health implications of short stay (early discharge), and the hospital's role in breastfeeding promotion. COMMUNITY (Closing Plenary V) will present the findings of the Healthy Futures/Healthy Generations Evaluation Project (sponsored by the federal government Maternal and Child Health Bureau, the Robert Wood Johnson Foundation, and the University of North Carolina School of Public Health) which show a reduction in infant mortality based on a combination of interventions, many of which are addressed throughout the conference.

Workshops will additionally provide information on model programs and issues important to special populations.

Plenary Speakers

**Promoting Prenatal Care: A Federal Perspective
Media Advocacy
Unintended Pregnancies**

**Donna Shalala (invited)
Anne Marie O'Keefe, JD
Charles Mahan, MD
University of South Florida
Feliccia Stewart, MD**

Baby Friendly Hospital Initiative

**Office of Population Affairs
Molly Pessl, RN**

Short Stay/Early Discharge

**Carol Brady, FL HMHB
Luella Klein, MD (invited)**

Healthy Futures/Healthy Generations

**American College of Ob/Gyn
Faculty Member, University of
North Carolina School of Public
Health**

Additional information on HMHB and the conferences is attached.

TALKING POINTS

- The need for adequate, accessible and responsive prenatal care is critical to the overall health and well being of mothers, children and families across the country. Primary and preventive care is cost-effective, because it reduces the need for more expensive treatment at a later date, when mothers and babies are already affected by illness and injury. When provided as part of a comprehensive health care plan including education, diagnosis and screening and referral, prenatal care is an effective tool for health care professionals of all disciplines to improve pregnancy outcome and the health of families.
- Preventive care should continue with well-child care including immunizations, nutrition counselling and assessment to ensure a child's ability to enter school physically ready to learn. The Healthy Mothers, Healthy Babies Immunization Education and Action Committee has worked closely with the President's Infant Immunization Initiative toward this end, alerting the public and providers of the importance of immunizing every child by age two.
- At a time when funding for programs is increasingly competitive, collaborative efforts among health care providers, administrators, educators, policy-makers, families and community leaders can strengthen the ability of each discipline to effectively provide health services needed for women and children, especially in underserved populations. Creating and sustaining systems which support such cooperative efforts should be a priority at the national, state and local level. Over the past fifteen years, Healthy Mothers, Healthy Babies coalitions at the state and local levels have demonstrated a variety of ways in which prenatal care can be made more accessible for the many underserved communities and communities of color whose high rates of infant mortality can and must be reduced. **We can appreciate and recognize this commitment to the health of families by dedicated communities through the 1995 HMHB National Achievement Awards, which will be presented to four local health education programs during this conference. These programs, from Ohio, Pennsylvania and North Dakota exemplify the spirit of collaboration, innovation and diversity which HMHB espouses.**
- The conference immediately follows the first national conference for Community Perinatal Outreach Workers, co-sponsored by the Healthy Start Division and Healthy Mothers, Healthy Babies. Outreach workers are a critical component of the health care delivery team at the grassroots level. HMHB and Healthy Start are committed to providing them with a national network and voice to support their work and recognize their value in promoting prenatal care.
- The charge to participants will be to take the ideas and skills they have shared back to their communities.

end w/ Mrs

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healthy mothers, healthy babies coalition

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Date: 9/15/95
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 Fax #: 202-456-5709 Phone #: 202-456-5708

From: Leslie Dunne, Program Associate
 Fax #: (202) 484-5107 Phone #: (202) 863-2458

Re: HMHB Conference

Message:
Enclosed are talking points for Mrs. Clinton.
Thank you for your help - please let us know
if you need additional information.

Reply:

Hard copy sent: YES NO

THE WHITE HOUSE
WASHINGTON

MEMORANDUM

FROM: HOLLY NICHOLS

DATE: 8/28

ORGANIZATION/ EVENT	HEALTHY MOTHERS, HEALTHY BABIES COALITION
DATE	OCTOBER 13
LOCATION	WASHINGTON, DC
EVENT DESCRIPTION	NATIONAL MEETING KEYNOTE
WH STAFF CONTACT	
NOTES	VIDEO 8/18
RESPONSE	LORI Cooper: (202) 863-4400 will call back to confirm.



Holly

healthy mothers, healthy babies coalition

August 9, 1995

Melanne Verveer
Deputy Assistant to the President
The White House
Washington, DC 20500

VIDEO

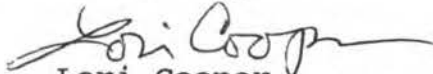
Dear Ms. Verveer:

I'm an optimist. I'm hoping that all necessary forces will converge to allow Mrs. Clinton to speak at the Healthy Mothers, Healthy Babies National Meeting on Friday, October 13.

I have enclosed a copy of my letter of invitation, as well as background information on the Coalition. (I was so personally and professionally encouraged when you told me at the Kiwanis luncheon earlier this year that you follow the Coalition's work.)

I will call you shortly to see if I may answer any questions or provide additional information. Thank you very much for your help.

Sincerely,


Lori Cooper
Executive Director

Enclosures

NATIONAL INITIATIVE FOR COMMUNITIES OF COLOR

BACKGROUND

In 1991, concerned by the disproportionately high rate of infant mortality among African-Americans, Healthy Mothers, Healthy Babies (HMHB) launched the Minority Outreach Initiative (MOI). The MOI grew into the **National Initiative for Communities of Color (NICC)**, an effort to improve communication and collaboration with minority organizations on various HMHB projects. HMHB is an information sharing coalition with a broad audience of maternal and child health professionals. The NICC and its activities represent HMHB's firm commitment toward building the infrastructure necessary to support cultural competence, both within our own organization and across the maternal and child health community.

The NICC has made significant strides toward providing culturally diverse communities, those most affected by maternal and child health issues, a national voice. In 1992, HMHB convened the **Communities of Color Leadership Roundtable**. The Roundtable brought together twenty community leaders and maternal and child health professionals from African American, Latin/Hispanic, Native American, and Asian/Pacific American communities nationwide to provide coalition members and state HMHB coalitions with direction and strategies to work more effectively within these communities.

The issues emphasized at the Roundtable directly influenced the development of the theme and focus of the plenaries and workshops for HMHB's 1993 national conference, "Cultural Diversity: Are We Serving Our Changing Populations?" and for the preconference training, "Cultural Competence Training: How Your Organization Can Make a Difference."

The Roundtable proceedings, *Unity Through Diversity: A Report on Healthy Mothers, Healthy Babies Communities of Color Leadership Roundtable*, were released at the conference. The 50-page report highlights the Roundtable discussion, summarizes key strategies for change, provides a directory of model programs, and offers recommendations to HMHB coalitions. The response to this publication has been overwhelming. The initial printing of 15,000 copies has been distributed and funds are being secured for a second printing. Respondents have indicated that they are using the publication in a variety of ways, including to convene their own roundtables, to educate others, and to develop action plans for their organizations.

This conference also sparked the formation of the NICC's **Perinatal Outreach Worker Empowerment Resource (POWER) Committee**. As a result of a conference plenary, "Community Outreach Workers: The Key to Access," a contingent of community outreach workers came together to discuss, at the same meeting, the various issues they would like HMHB and the maternal and child health community to recognize and respond to. HMHB concluded that one supportive role we could play would be to develop an issue committee to serve as a forum through which community perinatal outreach workers could discuss and communicate their issues nationally.

The POWER Committee first met in June 1994 and continues to meet quarterly. So far, significant progress has been made toward building a national network linking outreach workers and related organizations. The Network Building and Training Resources Task Forces are collaborating with the Centers for Disease Control and Prevention (CDC) to share a database of peer health worker programs. As the committee develops its network of outreach worker programs, each program will be encouraged to complete the necessary data entry forms to be included in CDC's database. The database will then be available to HMHB and anyone within our network through CDC/WONDER, an on-line computer service.

Programs will also be highlighted in the POWER Committee's quarterly newsletter, **POWER News**. A Newsletter Task Force is serving as an editorial advisory board to develop articles and features for the newsletter. Each issue of the newsletter focuses on a topic area relevant to outreach workers. Topic focus areas for recent and upcoming issues include: Adolescent Pregnancy and Parenting (Spring 1995), Core Competency, Credentialing, and Certification Issues (Summer 1995), Fathers/Male Involvement (Fall 1995), and Substance Use (Winter 1996). It is expected that the newsletter will serve as a networking and communications tool between individual outreach workers across the country.

Our efforts to support community perinatal outreach workers stimulated another NICC project. Together with the Maternal and Child Health Bureau's Division of Healthy Start, NICC staff members are participating in the planning of a **National Forum for Community Perinatal Outreach Workers**. The Forum will be held October 11-12, 1995, preceding HMHB's national conference in Rosslyn, Va.

NICC staff members continue to provide ongoing **technical assistance** to state coalitions, national member organizations, and others seeking to promote cultural competence. Technical assistance activities range from providing input on strategies for reaching communities of color and examples of model programs to providing names of appropriate contacts, speakers, and prospective Board members.

Efforts are also being made to recruit and develop **collaborative partnerships** with organizations representing communities of color. NICC staff members are gathering information about minority organizations in order to begin assessing the maternal and child health-related activities of each organization, identifying the activities HMHB could be most supportive of, and determining which activities HMHB could collaborate on. At a minimum, the activities of each of the organizations will be highlighted in upcoming newsletters and mailings.

For more information or to become involved with the activities of the NICC and the POWER Committee, please contact:

**Claudia Morris or Suzy Feikema
Healthy Mothers, Healthy Babies
409 12th Street, SW
Washington, DC 20024
(202) 863-2458**

HMHB thanks the following sponsors for their continued support of our minority outreach efforts:
Metropolitan Life Foundation • Maternal and Child Health Bureau • The Metpath Foundation
Health Care Financing Administration • Office of Minority Health

POWER Committee Interest Form

Please fill out and return this form to be included in the POWER Committee's activities.

Name _____

Title _____

Organization _____

Address _____

City _____ State _____ Zip _____

Telephone _____ FAX _____

E-mail address (if applicable) _____

* * * * *

I have completed the *CHID PROGRAM DATA SHEET: Peer Health Programs*. Please add my name to the mailing list for **POWER News** and other mailings.

Please send me other information related to outreach workers, as specified:

* * * * *

I am interested in participating in the POWER committee's quarterly meetings.

I would like to serve on a task force: Training Resources task force
 Network Building task force
 Newsletter Advisory task force

Other ways I can help (i.e. provide more outreach worker contacts, share developed training resources, write a newsletter article, serve as state or area POWER contact):

FAX form to (202) 554-4346 OR (202) 484-5107 or mail to address below.

I E A C



**IMMUNIZATION
EDUCATION AND
ACTION COMMITTEE**

409 12th Street, S.W.
Washington, DC 20024
(202) 865-1638

IMMUNIZATION EDUCATION AND ACTION COMMITTEE

**Healthy Mothers, Healthy Babies
409 12th Street, SW
Washington, DC 20024
(202) 863-1638
Fax 202-554-4346**

Martin Smith, M.D.

Chair

Jo Ivey Boufford, M.D.

Co-Chair

Valencia Clarke Rodgers, M.S.W.

Project Director

BACKGROUND

The **Immunization Education and Action Committee (IEAC)** was formed in response to the major effort needed to educate parents and guardians of the importance and effectiveness of today's vaccines. It was clear that the increasing demand for vaccination services needed to coincide with development of a cadre of information systems in both public and private sectors to meet the increased demand.

An undertaking of this magnitude required the cooperation and coordination of a broad variety of agencies and organizations in both public and private sectors. The office of the Surgeon General, U.S. Public Health Service, and the National Immunization Program, Centers for Disease Control and Prevention formed the **IEAC** under the auspices of the National Healthy Mothers, Healthy Babies Coalition to promote the vaccination of preschool age children.

IEAC MEMBERS

This broad-based collaboration includes the following types of organizations:

- **Provider organizations:** To assure that physicians, nurses, and other providers are fully implementing current recommendations to take advantage of all opportunities to vaccinate and to reduce barriers to immunization.
- **Parent/Guardians:** To inform them of the importance and effectiveness of the timely vaccination of their children.
- **Nongovernmental Organizations:** To educate and motivate parents and guardians; to educate community leaders of the needs and benefits of immunization. Among these groups are those who are known to work effectively to serve the needs of communities of color.

IEAC



Healthy Mothers. Healthy Babies.

IMMUNIZATION
EDUCATION AND
ACTION COMMITTEE

109 12th Street, S.W.
Washington, DC 20024
(202) 863-1638

MISSION STATEMENT

I. The Immunization Education and Action Committee (IEAC) is an issue committee of Healthy Mothers, Healthy Babies, which is comprised of national organizations in the public, private and non-profit sectors. The purpose of the IEAC is to achieve and maintain full immunization of at least 90% of all children in the United States by their second birthday, particularly children of ethnic and racial minorities and those in underserved communities. The IEAC provides national leadership through:

- Coordinating development and distribution of parent/caregiver education materials and practices;
- Facilitating implementation of effective practices in outreach and service delivery at the local level;
- Fostering collaboration among national IEAC members, and their state and local affiliates;
- Serving as a forum for identifying and promoting policies and practices that will improve and maintain child immunization rates at a high level;
- Developing informed and effective advocates for full immunization of all children by their second birthday.

II. To accomplish this mission the IEAC will operate the following committees:

A. Steering Committee

The Steering Committee will coordinate the activities of all of the subcommittees. This will include developing and assigning projects to support the mission, reviewing committee originated projects, and assisting the subcommittees in determining priorities. The committee will develop policy related to organizational development (e.g., selection of Steering Committee members, appointment of committee chairs, etc.), and resource allocation.

B. Professional and Public Education Committee

The Professional and Public Education Committee will coordinate development and distribution of parent/caregiver and provider educational materials and practices that will:

- Inform parents/caregivers of the need for and the effectiveness and safety of vaccines;
- Educate parents/caregivers about the risks of delaying completion of immunization until mandated by one or more laws or regulations (eg. daycare or school entry);
- Encourage community and opinion leaders to make their communities aware of the need for immunization and the need to make immunization services more widely available and easily accessible and to determine what priority immunization is for the community;
- Encourage professionals to reinforce the need for parents/caregivers to obtain the recommended immunizations on time and to know about the benefits and risks of vaccines administered;
- Reinforce the need for health care providers to know, and implement the "Standards for Pediatric Immunization Practice"; and
- Assist professionals in understanding how to utilize community outreach effectively and overcome cultural and linguistic barriers as well as religious objections to immunization access and follow-through.

C. Coalition Building Committee

The Coalition Building Committee will encourage, support and participate in national and local coalitions to facilitate implementation of an integrated approach to link families with immunization services and remove barriers to service delivery by:

- Developing organizational policies which foster collaboration;
- Providing information about materials, resources, and technical assistance in building and maintaining local coalitions;
- Sharing information about effective coalition models;

- Creating/designing vehicles for collaborative activities

(Such as National Preschool Immunization Week and regional, state, or local conferences of immunization partners); and
- Promoting local immunization coalitions that can also be used to facilitate linkage and access to other health care and community services.

D. Policies and Practices Committee

The Policies and Practices Committee will serve as a forum for identifying and promoting policies and practices that will improve child immunization rates at a high level by:

- Facilitating sharing of information about immunization registries and reminder/ recall systems; and
- Identifying and disseminating information about opportunities to link immunization services to other services used by families with children under two; and
- Promoting objective assessments of service delivery policies and practices to determine which are most effective in achieving and maintaining high immunization rates; and
- Advocating for wide adoption of "best practices" that are demonstrably effective.

HOW TO JOIN THE EFFORT

For further information you may contact Christine De La Torre, Program Associate, Immunization Education and Action Committee, 409 12th Street, SW, Washington, DC 20024 (202) 863-2414 or Conrad P. Ferrara, National Immunization Program, Centers for Disease Control and Prevention, (404) 639-8204. Thanks!!

IEAC HIGHLIGHTS

Ongoing	Fostering bilateral agreements between organizations such as BPHC, CDC and Action Vista
Ongoing	Membership in the IEAC prompts development of publications on hospital based immunization programs by CHA and NACHRI
Ongoing	Quarterly IEAC membership meeting
Ongoing	Health components of program services include new emphasis on immunizations for members such as La Raza and COSSMHO
Ongoing	Transfer of recommended good practices to member agencies
Ongoing	Growth of membership
Ongoing	Give presentations, represent at meetings and conferences, provide speakers
Ongoing	Maintenance and expansion of the resources list
Ongoing	Working to create models for protective legislation for volunteers
May, 1995	Host a workshop to present various mobile immunization van programs
Spring 1995	David Satcher, MD, PhD, Director of the Centers for Disease Control and Prevention addressed the IEAC membership
Spring 1995	Publication, printing and distribution of community organizing packet Immunizing America's Children: A Model Workshop
Spring 1995	Survey to identify mobile van programs that provide immunization services disseminated to 5000 programs across the nation
Winter 1995	Member of 1995 World Health Day Advisory Committee
Winter 1995	Participated on planning committee for the 29th Annual National Immunization Conference
Fall 1994	Selected to serve on the Advisory Committee of COSSMHO's immunization program Vacunas Desde La Cuna

Summer 1993	Immunization Survey to determine interest in local coalitions and immunization rates. Participants included members of Every Child By Two, Junior League, IEAC, HMHB state and local chapters and NICC
February-June 1993	Meetings with representatives from HCFA, HUD, MCHB, WIC, NVAC, Food Stamps
Spring 1993	Support of National Preschool Immunization Week
Spring 1993	Impact on HCFA's clarification of the proper use of a single antigen as opposed to multiple antigen vaccines
Spring 1993/ongoing	"Removing Roadblocks to Vaccination" poster, 120,000 posters printed and distributed
Winter 1992	Facilitated the dissemination of the AAP video "Before it's Too Late, Vaccinate"
Winter 1992/Ongoing	Seeking endorsement of the standards for Pediatric Immunization Practices
January 1993	1992 Child Health Day Survey Report
Winter 1992	"A Shot at the Future" video, 500 copies distributed
Fall 1992	Infant Immunization Initiative Project Director hired
Fall 1992	Systems and Linkages subcommittee
Spring 1992	Revision of subcommittees--Professional and Consumer Education, Volunteerism and Coalition Building, and Steering Committee formed
Fall 1991	IEAC subcommittees created--Professional and Consumer Education, Volunteerism, and Local Coalition Building
April 10, 1991	First quarterly meeting co-chaired by Surgeon General Antonia Novello, MD and Walter Orenstein, MD



healthy mothers, healthy babies coalition

August 9, 1995

First Lady Hillary Rodham Clinton
The White House
Washington, DC 20500

Dear Mrs. Clinton:

I am writing to invite you to address the Healthy Mothers, Healthy Babies Coalition's eighth Biennial conference, which will be held October 13 - 15, 1995, at the Key Bridge Marriott Hotel in Arlington (Rosslyn), Virginia. We would like you to speak at Friday morning's opening plenary at 9:00 a.m., but would of course flex the conference schedule to accomodate your own.

"Promoting Prenatal Care: Strengthening Linkages and Empowering Communities" will gather three to four hundred national and community health leaders and workers across disciplines in maternal and child health, business people, and policy makers committed to improving the U.S. health care system.

Our conferences are exciting forums for interchange between our grassroots constituency and our national coalition members. The participants are people who have already paid close attention to your leadership, and whose daily work reflects many aspects of your vision for U.S. health care. Your leadership at our conference--as always, manifested by your insightful analysis and clear commitment to women and children's health--would affirm their work, and provide direction for the future.

HMHB, comprising 104 national professional, voluntary and government organizations, addresses the concerns of medical and social welfare professionals about the high incidence of infant mortality and morbidity in the United States. We place particular emphasis on reaching low income women in ways that will help them recognize the importance of early prenatal care.

Our major initiatives currently focus on perinatal care education, development of infant mortality reduction and health promotion in communities of color, and institutionalization of immunization for zero to two year olds. (Information enclosed.)

I will be in touch with Melanne Verveer to learn how I may follow-up. I look forward to welcoming you.

Sincerely,

Lori Cooper
Executive Director



A MESSAGE FROM THE CHAIR...

Dear Colleagues: I'm delighted to have the opportunity to talk with you all in our re-designed newsletter! I hope that you find the new format makes the material we are providing easier to read and refer to. Let us know. By now you've seen the dates of our National Conference, **"Promoting Prenatal Care: Strengthening Linkages and Empowering Communities"**. I am looking forward to seeing you all in the Washington area October 13-15. The conference topic extends the theme of local ownership in programs and solutions that participants found relevant from the 1993 meeting and will be vital to maintain our mothers and infants in the climate of federal cutbacks that we find ourselves in today. It is a trying time for all of us who care, to see programs we know work being discarded without thought of the impact on those in need and the future health of our nation. HMHB is working to provide you with timely and useful information now, as it has over the past 10 years. And as always, we look forward to hearing from you about what's useful and relevant. In our next issue we'll be announcing the winners of our 1995 National Awards! See you in October.

Mollie Jenckes, HMHB Board Chair

MARK YOUR CALENDARS

October 11-12, 1995

National Forum for Community Perinatal Outreach Workers

October 13-15, 1995

Healthy Mothers, Healthy Babies Conference

"Promoting Prenatal Care: Strengthening Linkages and Empowering Communities"

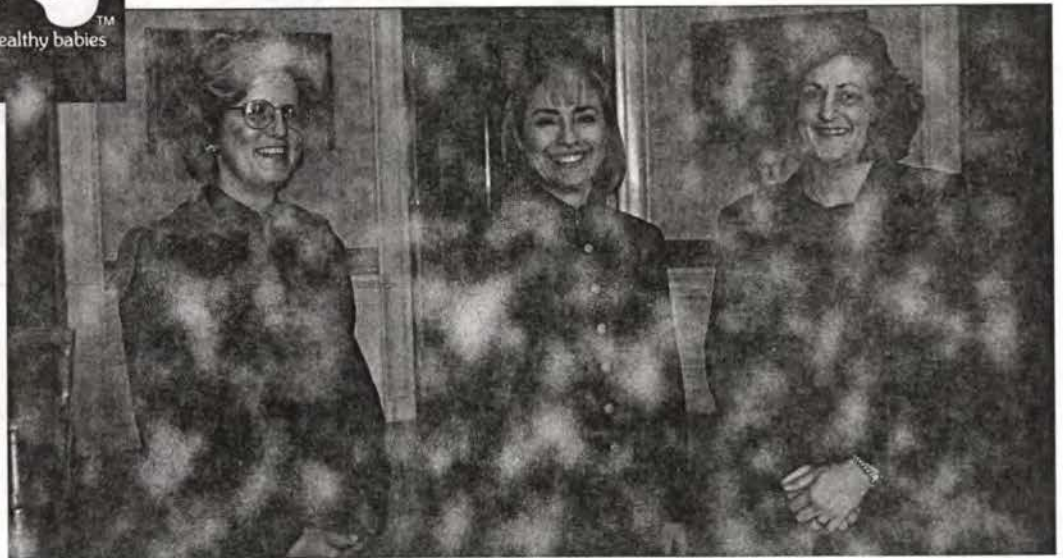
October 12, 1995

State HMHB Coordinators Meeting

Contact HMHB at (202) 863-2552.

Deadline to submit requests to exhibit, send videos or sponsor a roundtable is **SEPTEMBER 1, 1995**.

Priority will be given to HMHB sponsored projects, so contact HMHB NOW if you are interested.



First Lady Hillary Rodham Clinton met Mollie Jenckes (left), HMHB Board Chair, and Lori Cooper (right), HMHB Executive Director, during a White House Luncheon for the leaders of 35 Child Service Organizations who were gathered in Washington, DC for a meeting of Kiwanis International's Priority One Advisory Council on February 8.

Family Support and Preservation

Membership Forum: March 1995

The arena of family support and preservation is a highly emotional and challenging one. On March 21, HMHB welcomed two speakers to the quarterly membership meeting who provided federal and local perspectives on the issues of preventing family crises and protecting children. Maria Elena Orrego, formerly of The Family Place, a support center for Hispanic women in Washington, DC, is currently the local representative for the Family Resource Coalition, a growing national organization also concerned about family support. Daniel Lewis is Deputy Associate Commissioner for the Children's Bureau, DHHS.

"Family preservation" refers to efforts made at critical stages to avoid separating family members in difficulty. "Family support" is a more comprehensive system that improves the ability of stressed families to cope with challenges over time, in order to prevent crises from endangering the health and well-being of the family members.

In responding to the needs of families in difficult circumstances, Ms. Orrego noted the importance of providing early intervention and a continuum of care, with services for pregnant women at the beginning of the continuum. All families, but especially low-income families, must cope with a variety of challenges. Their ability to respond to their circumstances in positive ways depends on the type of support system they have, whether it be family, friends, employers or community.

The concept of family support embraces many facets of community involvement to help struggling families. Most families have some kind of support system to help them cope with difficult situations that arise (e.g. illness or loss of job) but there are those that need more formal support. Social and health professionals hoping to help families must begin by recognizing the needs and respecting the values of their clients without judgement. A positive outcome depends on the process of building trust between families and counselors, and providing truly family-centered care.

Mr. Lewis offered the federal perspective. He noted that policy makers need to see the families they are making decisions about. Site visits to various community family support projects provided his staff with a better understanding of the realities of families in crisis. He described the process of developing family preservation legislation, which includes entitlement funding, a comprehensive five-year plan with specific goals, the use of model programs and focus groups to identify the needs of family and providers, and assessment of the programs over time. He stressed the importance of a partnership between federal and state policy makers, grassroots community professionals and family members themselves to improve a system that can work to support and preserve the families that need help.

Contact Maria Elena Orrego, Family Resource Coalition, 611 Buckingham Drive, Silver Spring, MD 20901. (301) 434-5328 or Daniel Lewis, Children's Bureau, Room 2070, 330 C Street SW, Washington, DC 20201. (202) 205-8594.

PLEASE SHARE WITH YOUR COLLEAGUES.



ACROSS THE COUNTRY

ANNOUNCEMENTS

Call for Dental Programs

Are you involved in programs that promote dental health for pregnant women and young children? Stephanie Litz, DDS, MSD, of the Indiana HMHB Dental Health Committee, is interested in talking with you. Any members who are (or would like to start) promoting healthy smiles in their communities, please give her a call at (317) 929-3889. *This is an opportunity to include oral health in your 1995 agenda.*

The Substance Use and Pregnancy/HIV Issue Committee to Disband

The National HMHB Substance Use and Pregnancy/HIV Committee has decided to recess as of June, 1995. During the past decade, the committee has been an important resource on critical issues affecting pregnant women and their families. Over 20,000 Substance Use and Pregnancy packets were distributed nationwide from 1988 to 1991, and the committee has been responsible for bringing experts to share with the HMHB membership at our biennial conferences and quarterly meetings. HMHB continues to be committed to addressing both substance use and AIDS as priority issues, and will provide a forum for substance use and AIDS concerns in our publications and at meetings. The Substance Use/HIV Committee has already identified several pertinent topics for our October conference. *We encourage all HMHB members to let us know about your own projects and interests in these areas.*

Public Health Considerations of Prenatal Screening

Francess Page from PHS/OASH/OHAP and Trish Beachy from the Association of Women's Health, Obstetric and Neonatal Nurses led a discussion on the public health and ethical dimensions of prenatal screening at our quarterly membership meeting on June 13.

2 See the Summer HMHB News for details.

Arizona

The Gila River Indian Community (GRIC) held its annual Women's Health Fair on March 23, 1995, welcoming over 200 participants. In addition to providing health services (mammograms and pap smears), presentations included parenting classes, aerobic exercise demonstrations and childbirth education. The GRIC coalition also received a \$5,000 grant to implement the "Great Expectations" prenatal incentive program, which begins this year. Contact Rosemary Sullivan at (520) 315-3826.

In the Mohave County HMHB Coalition, eight members participated in a training session last February for the "Be a Winner" smoking cessation program sponsored by the American Lung Association of Arizona. The coalition will begin offering smoking cessation classes to pregnant women across the county beginning in May. This is particularly important in a county with maternal smoking rates more than twice that of the state.

Contact Roxena Wotring at (602) 266-0064.

Florida

The Steering Committee of Florida Healthy Mothers, Healthy Babies this fall adopted four legislative priorities for the 1995 legislative session: • Funding for Maternal and Child Health; • Health Care Reform for Mothers and Babies; • Voluntary Family Planning; and • School Health Services. Final legislative issue papers were provided to key lawmakers. Organizations and individuals throughout the state made advocacy visits while legislators were home this fall. Copies of the 1995 HMHB Legislative Issue Papers are available from the coalition office.

Contact Carol Brady, Director, FL HMHB, 653-1 West 8th Street, Jacksonville, FL 32209. (904) 549-5228.

Michigan

The Michigan coalition held their tenth annual conference, "Michigan in Transition: Empowering Advocates in Critical Times", on June 15-16, 1995 in Lansing, MI. Sponsored by the MI HMHB, Michigan Association for Local Public Health, the March of Dimes and the Michigan Department of Public Health, the conference provided a forum for health care providers and other interested individuals to: focus their attention on maternal and child health issues and services; learn effective advocacy; and identify the future direction of integrated service delivery to families.

Contact Sue Hodgman, Conference Coordinator, MALPH, P.O. Box 13276, Lansing, MI 48901. (517) 485-0660.

Montana

With the leadership of three prominent women, the statewide Healthy Mothers, Healthy Babies Coalition has been mobilizing across the state to immunize children. State First Lady Theresa Racicot, former state First Lady Carol Judge, and Carol Williams, wife of Congressman Pat Williams, have spearheaded the campaign, brought visibility to the initiative and motivated state legislative spouses to support immunization efforts in every county.

The Montana HMHB Coalition planned carefully in order to build a successful approach. Montana Every Child By Two has developed and distributed an information packet to all county public health departments, created public service announcements featuring Theresa Racicot, and built partnerships involving state and local agencies (including the Montana Extension Service), service clubs (Kiwanis and 4-H), and the business community (Blue Cross/Blue Shield).

Contact Elizabeth Roeth-Espelin, (406) 449-8611.

Wyoming

The Wyoming HMHB coalition received a \$15,000 federal grant to launch their immunization campaign, "Babies Need Love—And Immunizations". According to John Jones, communicable disease specialist with the Wyoming Department of Health, currently 64% of 2 year olds have age appropriate immunizations. While 64% compares favorably with many other states, efforts need to be made to reach the remaining 36%.

The Wyoming coalition will work with the state Wyoming Immunization Program to promote immunizations by getting communities involved. One major component will be production of a "Babies Need Love—And Immunizations" packet with information on immunization, health, safety and nutrition. The packet will be distributed to hospitals, community health care programs and other providers throughout the state. Wyoming HMHB chapters will also develop public service announcements to disseminate, and each community will hold a "kickoff" to introduce the campaign.

Contact Sherry Reddick at (307) 382-3060 for information or to get involved.



Focus on: *All Kids Count*

All Kids Count (AKC) is a Robert Wood Johnson Foundation (RWJF) initiated immunization program represented in over twenty sites across the United States. Since its inception in 1991, the Annie E. Casey, Flinn, Skillman and Wellness foundations have joined RWJF in supporting All Kids Count projects. **The AKC goal is to allow communities to develop new and innovative methods of monitoring the immunizations of preschool children.** The AKC Program concentrates on one facet of immunization activities at the community level, but one that is of utmost importance. Not only does the program support activities in monitoring the effectiveness of the total immunization effort, but also in tracking groups of children who are in greatest need of services.

Projects include developing a statewide database of childhood immunization records in Arizona, working with health departments to provide and track immunization records in Tennessee, and facilitating public-private collaboration in Wisconsin. All Kids Count is building immunization partnerships in local communities to include providers, administrators, policy makers and other community leaders. Projects coordinate their activities with the Centers for Disease Control and Prevention (CDC) and other immunization efforts.

The National AKC office, administered by the Task Force for Child Survival and Development in Atlanta, provides support, information and technical assistance to local projects. In return, local projects share their experiences and serve as models for colleagues in other areas through communication with the National AKC office. All Kids Count grantees are pioneering ways for the public and private sectors to work together. This presents an **opportunity for Healthy Mothers, Healthy Babies members** to strengthen and promote the AKC effort. Each project involves a community coalition. The local affiliates of the HMHB Immunization Education and Action Committee member organizations and local HMHBs can provide support to AKC efforts by encouraging involvement of private providers and supporting or joining these coalitions. Ensuring adequate immunization services requires developing systems to help communities track children and evaluate health care delivery. Consider how your HMHB coalition can become part of the process for realizing these goals.

Contact the National Program office to identify project directors in your areas or to receive their quarterly newsletter. All Kids Count, c/o the Task Force for Child Survival and Development, One Copenhill, Atlanta, GA 30307. (404) 873-7015.

C A L E N D A R

The Parents as Teachers National Center national conference is June 25-27, 1995 in St. Louis, MO. "Joining Forces for Young Families" will unite organizations and programs that are strongly committed to enhancing the well-being of young children and their families.

PAT National Center, Inc., 9374 Olive Boulevard, St. Louis, Missouri 63132.

(314) 432-4330.

Join **ASPO/Lamaze for their annual conference on August 18-20, 1995**, celebrating 35 years of commitment to women and families. The conference will be held in Washington, DC, and offers a unique opportunity to **CELEBRATE** the contribution of ASPO/Lamaze over the past 35 years, **COLLABORATE** through networking among researchers, educators and parents, and **ADVANCE** the ASPO/Lamaze mission by reviewing progress and finetuning the Plan of Action developed during the 1994 Summit.

Contact, ASPO/Lamaze, Annual Conference, 1200 19th Street, NW, Washington, DC 20036.

(800) 368-4404 or (202) 857-1128.

Immunization Education and Action Committee

The IEAC held the spring quarterly meeting on March 23, 1995 in Washington, DC, with keynote speaker David Satcher, MD, PhD, Director, Centers for Disease Control and Prevention. The next quarterly meeting will be held June 15, 1995.

Immunizing America's Children: A Model Workshop, highlighting a 1993 New Orleans event, will be available in June. The publication details how to organize and host a workshop on immunization, but can be adapted to other issues. It will be disseminated to the IEAC, POWER, and HMHB mailing lists.

World Health Day was celebrated April 7th, 1995 in Washington, DC. The keynote speaker was First Lady Hillary Rodham Clinton. Every Child By Two, All Kids Count, Group Health Association of America, and Walter Orenstein, MD, were all recipients of the Domestic World Health Day Award.

The Mobile Immunization Van Program survey has been disseminated across the nation. The IEAC hosted a workshop on mobile programs that provide immunization services in Los Angeles at the 29th National Immunization Conference in May.

National Infant Immunization week was April 22-29, 1995. This year's theme is the "Seven Days of Immunization".

For information on activities contact the National Outreach Program, (202) 260-9435.

For additional IEAC updates, see the next IEAC newsletter, or call Dee Dummore, (202) 863-1638.

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This newsletter is published quarterly to facilitate information exchange among maternal and child health professionals. Information is reported as provided and does not necessarily represent the view of or endorsement by the HMHB Coalition. Produced by Healthy Mothers, Healthy Babies, 409 12th Street NW • Washington, DC 20024-2188 • (202) 863-2458

Perinatal Outreach Worker Empowerment and Resource Committee

At the March quarterly meeting, the POWER Committee welcomed Patti Munter, Executive Director of the National Organization on Fetal Alcohol Syndrome (NOFAS). Ms. Munter provided an overview of the problem of FAS and of NOFAS' educational efforts to promote the understanding and prevention of the condition. See the first full issue of POWER News, the POWER Committee's new quarterly newsletter for outreach workers for a full report.

The POWER Committee continues to expand its network of outreach workers and outreach worker programs. In collaboration with the CDC, the committee is distributing datasheets for entry into a database of peer health worker programs. NICC staff is able to access the database and to provide information to inquirers. State HMHB coordinators will be contacted soon to help participate in this important project.

Planning is also progressing for the National Forum for Community Perinatal Outreach Workers. The forum, co-sponsored by the Division of Healthy Start, will be held October 11-12, 1995, preceding HMHB's national conference. It will bring together, for the first time, perinatal outreach workers from across the country to network and share information. Please encourage outreach workers to make plans to attend.

Attention: ACTION REQUIRED

By now, you have received both the Immunization and Action Committee (IEAC) and the Perinatal Outreach Worker Empowerment Resource (POWER) committee newsletters. If you want to continue to receive either (or both) newsletters, you must return the attached form. You will remain on the HMHB News mailing list, unless you tell us to remove your name.

Check all that apply.

Put me on the IEAC newsletter list.

Put me on the POWER newsletter list.

Name: _____

Organization: _____

Address: _____

Phone: _____

Take me off the HMHB newsletter list.



RESOURCES

The Maternal and Child Health Bureau recently released the *MCH Program Interchange: Focus on Low Literacy*. This edition of *The Interchange* was a collaborative effort of the Healthy Mothers, Healthy Babies Committee on Low Income Women and the National Center for Education in Maternal and Child Health (NCEMCH). It describes patient education materials for pregnant and postpartum women who have at least a fifth grade reading level. Materials are grouped according to subject matter, such as perinatal and women's health, nutrition, breastfeeding, injury and violence prevention, and oral health. The MCH Program Interchange is routinely distributed to health care professionals including directors of state MCH and CSHN programs, regional MCH consultants, and Healthy Start sites.

Contact the MCH Clearinghouse, 8201 Greensboro Drive, Suite 600, McLean, VA 22102. (703) 821-8955 x265.

The Alliance to End Childhood Lead Poisoning announces the release of a new publication, *Lead Is A Silent Hazard* (Walker and Company: New York, 1994) by Richard M. Stapleton, which offers a common sense guide for parents and advocates on childhood lead poisoning. Written in lay language, the book provides an overview of testing and treatment, reviews the multiple sources of lead exposure in homes, and gives practical advice on how to protect children.

Contact the AECLP, 227 Massachusetts Ave., NE, Suite 200, Washington, DC 20002. (202) 543-1147.

The National Association for the Education of Young Children (NAEYC) presents their newest publication, *Grassroots Success! Preparing Schools and Families for Each Other*. Based upon the experiences of 20 diverse School Readiness initiatives funded by the W.K. Kellogg Foundation, this book outlines practical recommendations for building partnerships between parents, children and education professionals. Explored topics include cultural competence, recognizing family strengths, support networks, and building on community resources.

Contact NAEYC, 1509 16th St. NW, Washington, DC 20036-1426. (202) 328-2604, (800) 424-2460.

Baby Friendly Hospital Initiative

The Baby Friendly Hospital Initiative Feasibility Study has been completed. An Expert Work Group (EWG) was convened for the study to review and adapt (as necessary) the UNICEF-WHO BFHI and its Ten Steps and Criteria, Assessment and Recognition process. The EWG members represented the majority of hospitals and health care professionals providing maternity services in the U.S. today. Breastfeeding advocates and consumers were also represented. Dr. Linda Randolph, a public health pediatrician from Mt. Sinai School of Medicine, served as the convener of the EWG, which recommended the following adaptations:

- The BFHI Global Criteria have been reworded with an emphasis on: 1) promoting adherence to principles of maternal choice and informed consent; 2) addressing hospitals; 3) including specific practices supportive of breastfeeding; and 4) using a positive tone in place of a perceived punitive one.

- It is recommended that the BFHI Hospital Designation Process be a universal, voluntary program with an emphasis on: 1) a self-appraisal and hospital assessment (site visit) process which is limited to a hospital self-assessment based on continuous quality improvement. It would use a validated U.S. self-assessment instrument that addresses disciplines (e.g. obstetrics, pediatrics, nutrition and administration) in addition to nursing; and 2) a National BFHI Authority which would be privately supported, multi-disciplinary, independent review body that determines requirements for and implements hospital recognition.

- It is recommended that the U.S. Initiative be retitled the "United States Breastfeeding Health Initiative"

so that the title is linked with the focus of the initiative (breastfeeding) and avoids implied characterizations of non-participating hospitals as "baby unfriendly." The new title also recognizes breastfeeding as a first step towards life-long "breast health."

Assistant Secretary for Health, Philip Lee, wrote to the Executive Director of UNICEF that "the Public Health Service (PHS), on behalf of the U.S. Government, accepted the recommendations of the EWG and believes that the "U.S. Breastfeeding Health Initiative" will assist us to move forward in our national efforts to promote breastfeeding. The PHS believes that the EWG's recommendations are important to the successful design and implementation of any national U.S. hospital-based breastfeeding promotion program and the recommendations will be disseminated widely."

Copies of the Final Report with Appendix I (Ten Steps and Criteria for U.S. Breastfeeding Health Initiative) and Appendix II (EWG participants) are available upon request. The other appendices have not been prepared for formal distribution, but may be used by appointment in the national office. Requests should be made to Suzy Feikema at (202) 863-2458.

The U.S. Committee for UNICEF has issued almost three hundred Certificates of Intent to hospitals and birthing centers as of this date. The Committee now plans to collaborate with WELLSTART International to develop a process for implementation and evaluation. Materials for both the global Baby Friendly Hospital Initiative and the national Breastfeeding Health Initiative are being reviewed for possible integration.

Contact Susan Silveus (212) 922-2550 at the U.S. Committee for further information.



Dear Colleagues,

The Immunization Education and Action Committee of the Healthy Mothers, Healthy Babies Coalition hopes that you will use this publication to broaden your effort in educating your community about childhood immunizations. The May 26, 1995 issue of Morbidity and Mortality Weekly Report states that for the combined series of four doses DTP, three doses of poliovirus vaccine, one dose of MMR, and at least three doses of Hib, coverage was 60.2%. We need to focus our resources on achieving the Healthy People 2000 goal of fully vaccinating 90% of children by 2 years of age. Health care professionals and community activists alike can use this guide to organize the effort needed to improve immunization rates of children 0-2 years of age in diverse communities across the nation.

Immunizing America's Children: A Model Workshop provides an opportunity to highlight and enhance the impact of your existing immunization efforts. The workshop can help increase awareness of age-appropriate immunization, enhance existing partnerships, and attract new partners who can participate in long-term education efforts.

This publication contains background materials and includes a sample task list, invitation, agenda, press release, etc. It provides recommendations to maternal and child health programs across the the country that are doable and lay the groundwork for the process of inclusion of community members at every level from the planning committee to presenters and panelists.

Immunizing America's Children: A Model Workshop can be tailored to your community's specific needs. You may decide to use all or some of the recommendations. Although this publication focuses on childhood immunization it can easily be adapted to a broad range of maternal and child health issues.

I would like to commend Mary Claire Walsh, American Academy of Pediatrics and Magdalena Castro-Lewis, National Coalition of Health and Human Services Organizations (COSSMHO) as current co-chairs of the Professional and Public Education Subcommittee for taking on the leadership for this project among the other subcommittee activities.

We trust you will find this to be an effective resource and look forward to hearing from you about your activities and your use of this guide.

Sincerely,

Martin Smith

Martin H. Smith, M.D.
Chair, IEAC



healthy mothers, healthy babies coalition

Healthy Mothers, Healthy Babies

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rev. 1/95

The continued crisis in health care access in communities across the U.S., and the need for improved health education as part of multi-disciplinary prevention services have made collaborative efforts necessary within the maternal and child health arena. Healthy Mothers, Healthy Babies provides information and a forum for health care professionals to collaborate on activities targeting the improved health of women and children.

GOALS AND OBJECTIVES: The National Healthy Mothers, Healthy Babies Coalition seeks to:

- Promote public awareness and education about perinatal health issues, with a special focus on preventive health habits for all pregnant women and their families;
- Develop networks for sharing information among groups concerned about improving the health of mothers and babies;
- Distribute public and professional education materials on topics related to improving maternal and child health;
- Assist the development of State and local Healthy Mothers, Healthy Babies Coalitions by providing technical assistance and resource materials to them on an ongoing basis.

METHODOLOGY: The national coalition has 104 members, representing national voluntary organizations, health professional organizations, and the Federal Government. It is governed by a Board of Directors and organized into working issue committees: Adolescent Pregnancy, Breastfeeding Promotion, Genetics, Immunization Education and Action (IEAC), Injury/Violence Prevention, Oral Health, Outreach to Low-Income Women, Perinatal Outreach Worker Empowerment Resource (POWER) and Substance Use and Pregnancy/Pediatric AIDS. It is staffed by the national coalition office located in Washington, D.C. **Please contact HMHB if you are interested in getting involved with our issue committees, or becoming an associate or organizational member of HMHB.**

Coalition activities to accomplish the above include national and regional meetings for information sharing and skills building, development and dissemination of resource materials for professionals and the general public, and an annual national awards program to recognize outstanding programs in public education and coalition building to promote maternal and infant health.

There are Healthy Mothers, Healthy Babies Coalitions in all States (and Puerto Rico, Guam, and the Virgin Islands) which provide public education on prenatal health and/or conduct professional education and legislative advocacy on maternal and child health issues. The national office communicates with these coalitions on a regular basis and provides technical assistance to states in building and strengthening coalitions. The coalition has experienced rapid growth at both the national and state levels since its inception, often bringing together groups or organizations who have never before worked collaboratively.

Through meetings, conference exhibits, press conferences, surveys and reports, publications, and a quarterly newsletter, the national coalition reaches thousands of individuals each year with information and strategies for improving maternal and child health. This is especially important in linking federal and state groups in the public and private sector.

ACTIVITIES: The coalition has provided a mechanism for committed individuals and organizations to share ideas for improving maternal and infant health; it has required that they share resources as well as commitment in order to increase awareness among women and their families, and their health care providers. The coalition, through the national office, extends and reinforces maternal and infant health educational campaigns and projects of the Maternal and Child Health Bureau and of coalition members.

Ongoing Activities of the Coalition include:

- Quarterly membership meetings of the national Healthy Mothers, Healthy Babies Coalition, focusing on health issues including health care reform, intergenerational child care, rural health, cultural diversity, immunization, substance use and pregnancy, underserved populations, environmental health and injury prevention.
- Quarterly meetings of seven HMHB national issue committees. We encourage involvement in committees by health care administrators and other professionals. Committee activities include public and provider education, speaker and other resource identification, and networking.
- Publication of a quarterly newsletter to highlight HMHB national and state member activities, health care and policy trends, publications, model programs and initiatives from national and grassroots communities.
- Biennial national conference. The October 1995 conference, "**Promoting Prenatal Care: Strengthening Linkages and Empowering Communities**" will welcome over 400 health care professionals and community leaders to D.C., to explore current issues in MCH. The conference will be preceded by the first national forum for Community Perinatal Outreach Workers, co-sponsored by HMHB and the Healthy Start Division.
- Provision of technical assistance to organizations in the public and private sectors on coalition-building, public information campaigns on prenatal care, and media inquiries on prenatal care and infant mortality.
- Coordination of selection and presentation of annual Healthy Mothers, Healthy Babies National Achievement Awards (presented in October at the National Conference) in Washington, D.C.

HMHB Initiatives

- Continuation of the National Initiative for Communities of Color (formerly the Minority Outreach Initiative) to improve communication and collaboration with minority organizations on various HMHB projects. In 1993, NICC produced *Unity Through Diversity*, a 50-page report on recommendations from a HMHB sponsored symposium of community leaders representing African American, Hispanic/Latino, Asian and Native American populations, which addressed infant mortality and maternal and child health in minority communities.

The NICC initiated the Perinatal Outreach Worker Empowerment Resource (POWER) Committee in 1994, to provide a forum and national voice to lay outreach workers in communities across the U.S. We invite outreach workers to become involved in the committee, and to plan on attending the HMHB/Healthy Start forum in October. In addition, the committee produces a quarterly newsletter, POWER News, which will be used as a vehicle to share resources and information.

- Coordination with the Centers for Disease Control's Infant Immunization Initiative to provide ongoing support for the Immunization Education and Action Committee, an issue committee of the national coalition. This committee meets quarterly in Washington, DC, and is instrumental in fostering collaboration among immunization and other child health professionals in the U.S. The committee also produces a quarterly newsletter.

PUBLICATIONS: (single copies available free)

- *HMHB Newsletter* (produced quarterly)
- *POWER News* (produced quarterly)
- *IEAC Newsletter* (produced quarterly)
- *Unity Through Diversity: A Report on Healthy Mothers, Healthy Babies Communities of Color Leadership Roundtable* (currently out of print, expected reprint in 1995).
- *What Gives These Companies A Competitive Edge? Worksite Support for Breastfeeding Employees.*
- *A Guide to Establishing a Lactation Room at the Worksite*
- *Removing Roadblocks to Vaccination* poster on immunization contraindications for health care providers (fee for handling).
- Resource Lists on the following topics are also available, with information on publications and organizations.

Adolescent Pregnancy
Breastfeeding/Nutrition
Cultural Diversity
Domestic Violence
Homelessness and Access to Care
Immunization
Pregnancy (for professionals and the general public)
Substance Use and Pregnancy
Women and HIV/AIDS

Healthy Mothers, Healthy Babies Coalition
National Members
August, 1995

Alan Guttmacher Institute

Alliance of Genetic Support Groups

American Academy of Family Physicians

American Academy of Pediatric Dentistry

American Academy of Pediatrics

American Association of Dental Schools

American Association of University Affiliated Programs
for Persons With Developmental Disabilities

American Association for Maternal and Neonatal Health

American College of Nurse-Midwives

American College of Obstetricians And Gynecologists

American College of Occupational Medicine

American Dental Association

American Dental Hygienists' Association

American Dietetic Association

American Association of Family and Consumer Sciences
(Formerly American Home Economics Association)

American Hospital Association

American Lung Association

American Medical Association

American Nurses' Association

American Public Health Association

American Red Cross

American Society of Dentistry
For Children

American Society for Psychoprophylaxis
In Obstetrics, Lamaze, Inc.

The Arc (Association for Retarded Citizens of the U.S.)

Association for the Advancement Of Health Education

Association of Junior Leagues

Association of Maternal and Child Health Programs

Association of State and Territorial Health Officials

Association of Women's Health, Obstetric and Neonatal Nurses

Auxiliary to the National Medical Association, Inc.

Advocates for Youth (Formerly the Center For Population Options)

Centers for Disease Control

International Cesarean Awareness Network

Cesareans/support, Education and Concern (C/sec, Inc.)

Child Welfare League of America

Children's Defense Fund

Council of Regional Networks for Genetics Services

Depression after Delivery

Future Homemakers of America

General Federation of Women's Clubs

Head Start Bureau, USDHHS

Health Care Financing Administration

Health Education Association, Inc.

International Childbirth Education Association

International Lactation Consultant Association

Kiwanis International

La Leche League International

Learning Disabilities Association of America

March of Dimes Birth Defects Foundation

Military Family Resource Center

Midwives Alliance of North America

National Association for Perinatal Addiction Research and Education

National Association of Children's Hospitals and Related Institutions

National Association of Community Health Centers, Inc.

National Association of City & County Health Officials

**National Association of Parents and Professionals
For Safe Alternatives in Childbirth**

National Association of Pediatric Nurse Associates and Practitioners

National Association of Perinatal Social Workers

National Association of Social Workers

National Association of State Boards of Education

National Association of WIC Directors

National Black Nurses Association, Inc

National Catholic Education Association

National Center for Education In Maternal and Child Health

National Coalition Against Domestic Violence

**National Coalition of Hispanic Health and Human
Services Organizations/ COSSMHO**

National Council on Alcoholism and Drug Dependence

National Council of Catholic Women

National Council of Jewish Women

National Dental Association

National Family Planning and Reproductive Health Association

National Highway Traffic Safety Administration

National Medical Association

National Organization on Adolescent Pregnancy and Parenting

National Parent-Teachers Association

National Perinatal Association
National Perinatal Information Center
National Society of Genetic Counselors, Inc.
National Urban League
National Women's Health Network
Parent Care, Inc.
Planned Parenthood Federation of America
Pregnancy and Infant Loss Center
Society for Adolescent Medicine
Society for Nutrition Education
Sudden Infant Death Syndrome Alliance
The Salvation Army
Teratology Society
Triplet Connection
USDA/Food and Nutrition Service
USDA/HEHN Extension Service
USDA/Science and Education
US Public Health Service
Bureau of Maternal and Child Health Resources Development
US Public Health Service
Indian Health Service
US Public Health Service
Office of Minority Health
US Conference of Local Health Officers
Urban Institute
YMCA of the USA
YWCA
Zero to Three: National Center For Clinical Infant Programs

PROMOTING PRENATAL CARE



Strengthening
Linkages &
Empowering
Communities

Healthy Mothers, Healthy Babies

National Biennial Conference
October 13-15, 1995
Key Bridge Marriott Hotel
Arlington, Virginia



Healthy Mothers, Healthy Babies is committed to making health care accessible to all communities in the U.S., particularly those who have historically been denied access. Promoting Prenatal Care: Strengthening Linkages & Empowering Communities will explore the current public health concerns affecting the well-being of families. It will also identify practical responses for agencies, providers, families, community leaders and other potential partners to create and support comprehensive, community-based health care systems. This is especially important to ensure adequate and appropriate health care for women, children and families in low income and communities of color. Participants will come together to address the challenges, share program models that work, and offer a variety of cultural, professional and social perspectives to encourage new and effective collaborations within communities.

Who Should Attend

Maternal and child health administrators, health educators, nurses, clinic directors, physicians, dietitians, health care advocates, community outreach workers, WIC directors, national and state policy makers, and health-related industry leaders. Join state and national HMHB members in this outstanding, interactive and informative three-day conference.

Invited Speakers

- First Lady Hillary Rodham Clinton
- Donna Shalala
Secretary, U.S. Department of Health and Human Services
- Reed Tuckson, M.D.
President, Charles R. Drew University of Medicine and Science

Special Notes

- Conference participants will be provided continental breakfast Friday through Sunday, lunch on Friday and Saturday, and an opening reception on Friday.
- Continuing Education Units are being applied for.
- The first national forum for Perinatal Outreach Workers, co-sponsored by the Healthy Start Division and Healthy Mothers, Healthy Babies, will precede the HMHB conference on October 11 and 12 at the hotel.

Conference Schedule

Thursday, October 12

- 10 AM – 4 PM: State HMHB Coordinators Meeting
- 2 PM – 6 PM: Child Watch Activity
- 5 PM – 9 PM: HMHB Board of Directors Meeting

Friday, October 13

- 8 AM – 5 PM: Registration
- 9 AM – 7 PM: Morning Plenary and Panel Discussion
Workshops
Luncheon with Speaker
Afternoon Plenary
Workshops

Reception—Everyone is invited to join in the networking icebreaker to meet your colleagues.

Saturday, October 14

- 8 AM – 5 PM: Registration
- 9 AM – 5 PM: Morning Plenary
Workshops
Awards Luncheon
Workshops

Video Reception—Watch the latest videos while you enjoy afternoon refreshments.

Sunday, October 15

- 8 AM – noon: Registration
- 9 AM – noon: Morning Plenary
Workshops

Healthy Mothers, Healthy Babies gratefully acknowledges the sponsorship of this conference by the Maternal and Child Health Bureau (DHHS) and the U.S. Department of Agriculture, and the support of Johnson & Johnson.

ManagedCare

Code Title

- 36 Managed Care Programs: A Primer
- 37 Update on Medicaid, Managed Care and MCH
- 38 Medicaid Managed Care and Outreach Workers

Systems/Policy

Code Title

- 39 Building Policies to Sustain Outreach Workers
- 40 Proposition 187
- 41 Medicaid/AFDC/HCFA Updates
- 42 Linkages MCH/WIC
- 43 How Outreach Workers Can Influence Policy

Special Events

State HMHB Coordinators Meeting: We invite state HMHB coalitions to choose one representative to join us on Thursday for a day-long symposium which will include highlights of state HMHB activities, skills-building sessions, and networking with your state and local colleagues.

Pre-Conference Activity/Child Watch Program: What is Child Watch (CW)? CW was developed by the Children's Defense Fund as a way to educate community leaders about what is happening to our children. CW seeks to personalize children's struggles by taking participants on strategically planned site visits to health/social service agencies illustrating both the range of serious problems facing children and the various programs working on their behalf. In coordination with the HMHB Conference, the Coalition Building Subcommittee of the IEAC is sponsoring a Child Watch activity addressing the issue of barriers to immunization. The CW visit will take place on Thursday, October 12, 2-6 PM. The site visit will be supplemented by a Conference workshop on Child Watch Training (time TBA). CW is an invaluable tool for you to take back to your respective communities to educate your community leaders about children's issues and motivate them toward action. **Space is limited; please RSVP. For more details, call Dena Wichansky at (202) 863-4993.**

Achievement Awards Luncheon: Join us in congratulating the 1995 National HMHB Achievement Awards winners at our annual awards presentation. This networking lunch is also a great opportunity to meet new colleagues and catch up with old ones.

Breakfast Roundtables: On Saturday morning, participants will meet in small, informal groups to enjoy a continental breakfast and have directed discussion on a variety of topics. Attendees and speakers will be given the opportunity to: network with national HMHB Issue Committee members; discuss innovative MCH programs; follow-up on conference workshops; and discuss special interests.

Video Showcase: HMHB membership organizations will present their very latest and best low cost videos.

Exhibits: Table-top displays featuring the latest publications, innovative programs, and a variety of resource materials will be provided by the HMHB member agencies throughout the conference.

DC Highlights: Welcome to Washington, DC. The Marriott Hotel is located just across the Key Bridge from picturesque Georgetown, and is within a short metro or cab ride to the downtown and mall areas of the nation's capital. We invite you to explore Washington on Saturday afternoon and

Hotel Information

Key Bridge Marriott Hotel

1401 Lee Highway
Arlington, Virginia 22209
(800) 327-9789

The Key Bridge Marriott will be offering conference participants a special room rate of \$110 single and \$115 double occupancy, plus a 9.75% Virginia tax. Reservations must be arranged no later than September 22, 1995, in order to receive the special conference rates. Call (800) 327-9789 and be sure to identify yourself as a Healthy Mothers, Healthy Babies Conference attendee. A first night deposit or guarantee with a major credit card will be required.

Transportation Information

Air Travel: Call CONNECTIONS Travel Agency at (800) 638-8029 for a guaranteed lowest fare on any air carrier. Meeting participants will be offered either a discount off the lowest qualifying promotional airfare or a discount off the regular round-trip coach fare -- whichever is less. Be sure to indicate that you are attending the Healthy Mothers, Healthy Babies Conference.

The Key Bridge Marriott Hotel is accessible from three airports: Washington National Airport (20 minutes), Dulles International Airport (45 minutes), and Baltimore-Washington International (BWI) Airport (1 hour).

Train: Amtrak passengers should arrive in Washington, D.C. at Union Station.

Metro Rail/Airport Shuttles: The hotel is located two blocks from the Rosslyn Station on the blue and orange lines. A shuttle bus runs every 20 minutes between this stop and the Marriott from 6:30 AM - 6:30 PM.

■ Union Station: take the red line to Metro Center Station and transfer to the blue or orange lines.

■ National Airport: take the blue line to the Rosslyn Station.

■ Dulles Airport: call Washington Flyer at (703) 685-1400 for shuttle service into Washington, D.C. or to Metro Rail.

■ Baltimore/Washington Airport: call BWI information, (800) 435-9294 for a variety of ground transportation options to the Washington, D.C. area.

Taxi: Taxis are available to the hotel from National Airport (\$10-15), Dulles Airport (\$30-40), BWI Airport (\$50-60), and Union Station (\$10-15).

Auto: Ample parking is \$7.50 per day for participants and \$6.00 per day for hotel guests at the Key Bridge Marriott Hotel.

Additional Information

Call the Healthy Mothers, Healthy Babies Conference Hotline at (202) 863-2552 with questions. Or write to us at:

Healthy Mothers, Healthy Babies Conference

409 17th Street, SW

Registration Form

Office Use Only:

Post Mark Date _____

Date Received/By _____

Purchase Order No. _____

Check No. _____

Amount Received _____

Entered by _____

1995 Healthy Mothers, Healthy Babies National Conference

Key Bridge Marriott Hotel
Arlington, Virginia
October 13-15, 1995

NAME (FIRST/LAST) _____

TITLE (MR., MS., DR.) _____

WORK PHONE _____

FAX PHONE _____

PROFESSIONAL TITLE (DEGREE) _____

ORGANIZATION _____

ADDRESS _____

CITY _____

STATE/PROVINCE _____

ZIP/POSTAL _____

Select The One Category in Which You Most Actively Participate In The Coalition:

STATE HMHB COORDINATOR

STATE HMHB MEMBER

NATIONAL HMHB MEMBER

HMHB ISSUE COMMITTEE

(SPECIFY _____)

OTHER (CONSUMER CONSULTANT INDIVIDUAL)

I will represent my state at the State HMHB Coordinators Symposium on October 12. (Only one designated representative allowed per state.)

I will attend the Child Watch session on October 12.

Check Any Participant Special Needs That Apply:

VEGETARIAN MEALS

ACCESSIBILITY NEEDS

(SPECIFY _____)

For Planning Purposes, List The Top Four Choices Of Workshop Codes You Are Interested In Attending:

(see list)

Registration Post Mark Deadline:September 15, 1995

Registration Fee:\$225

Registration Fee After September 15, 1995:\$275

Cancellation Fee Before September 29, 1995:\$50

REGISTRATION FEE: Enclosed is my check or approved purchase order in the amount of \$ _____. Checks should be made payable to **Healthy Mothers, Healthy Babies Conference**. NO CREDIT CARDS ACCEPTED.

REGISTRATION DEADLINE AND REFUND POLICY: Registrations are limited; so mail yours today. All registrations must be postmarked by September 15. After September 15, the registration fee is \$275. Cancellations received by HMHB prior to September 29 will receive a refund minus a \$50 cancellation fee. No refunds will be available after September 29. On-site registrations will be accepted on a space available basis.

REGISTRATIONS CANNOT BE PROCESSED WITHOUT PAYMENT OR AN APPROVED

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1995 National Achievement Awards



healthy mothers, healthy babies™

Healthy Mothers, Healthy Babies Coalition 1995 National Achievement Awards

The need for adequate, comprehensive health care for all families continues to be of major concern for community leaders, health care providers, legislators, and family members. In recent history, the crisis of health care in the U.S. has been at the forefront of our social and political agenda. But the response to the needs of communities by dedicated health care professionals is not new. Successful programs which target women and children in underserved populations offer opportunities to model methods that work.

HMHB is pleased to recognize four of these exemplary programs with the presentation of the Eleventh Annual Healthy Mothers, Healthy Babies National Achievement awards. This year's winners will be honored at an awards ceremony to be held during the HMHB educational conference "Promoting Prenatal Care: Strengthening Linkages and Empowering Communities", Oct. 13-15, 1995 in Arlington VA. In addition, award winners will participate in a conference workshop session highlighting their programs. The National Healthy Mothers, Healthy Babies Coalition presents achievement awards annually in recognition of outstanding programs or projects that promote maternal and infant health through public education, outreach, and coalition building.

The Healthy Mothers, Healthy Babies Coalition is an informal association of over 100 national and 100 state and local professional, voluntary, and governmental organizations, with a common interest in maternal and infant health. The purpose of the coalition is to foster education efforts for pregnant women through collaborative activities and sharing of information and resources. The National Achievement awards began in 1984 as a way of recognizing and commending these efforts on the local level and providing our constituents with the opportunity to learn about education efforts which target families.

Category Three

State and Local Coalition Building

"Baby Your Baby" Media and Outreach Campaign Philadelphia, PA

The Delaware Valley Partnership for Healthy Babies is a coalition of maternal and child organizations that has implemented a multi-media and outreach campaign. The "Baby Your Baby" campaign brings together the non-profit, media and corporate communities in a coordinated effort to combat the regions high rates of infant mortality and morbidity. The campaign aims to reach all women of childbearing age, their families, friends and the general public. "Baby Your Baby" has three main components: there is a multi-media component using television, radio and print, an educational component which uses posters, flyers, brochures, and newspaper ads., and finally, the campaign provides a toll-free information line which puts women in touch with public health forces. The "Baby Your Baby" campaign has been a driving force in communities in reducing infant mortality rates and improving the use of vital health services.

Contact: Cathy Melfi

Delaware Valley Partnership for
Healthy Babies
2000 Hamilton St., Suite 205
Philadelphia, PA
(215) 972-0700

Baby Your Baby

Call the "Baby Your Baby" Helpline

1-800-876-MOMS



A Better Start

Category Four

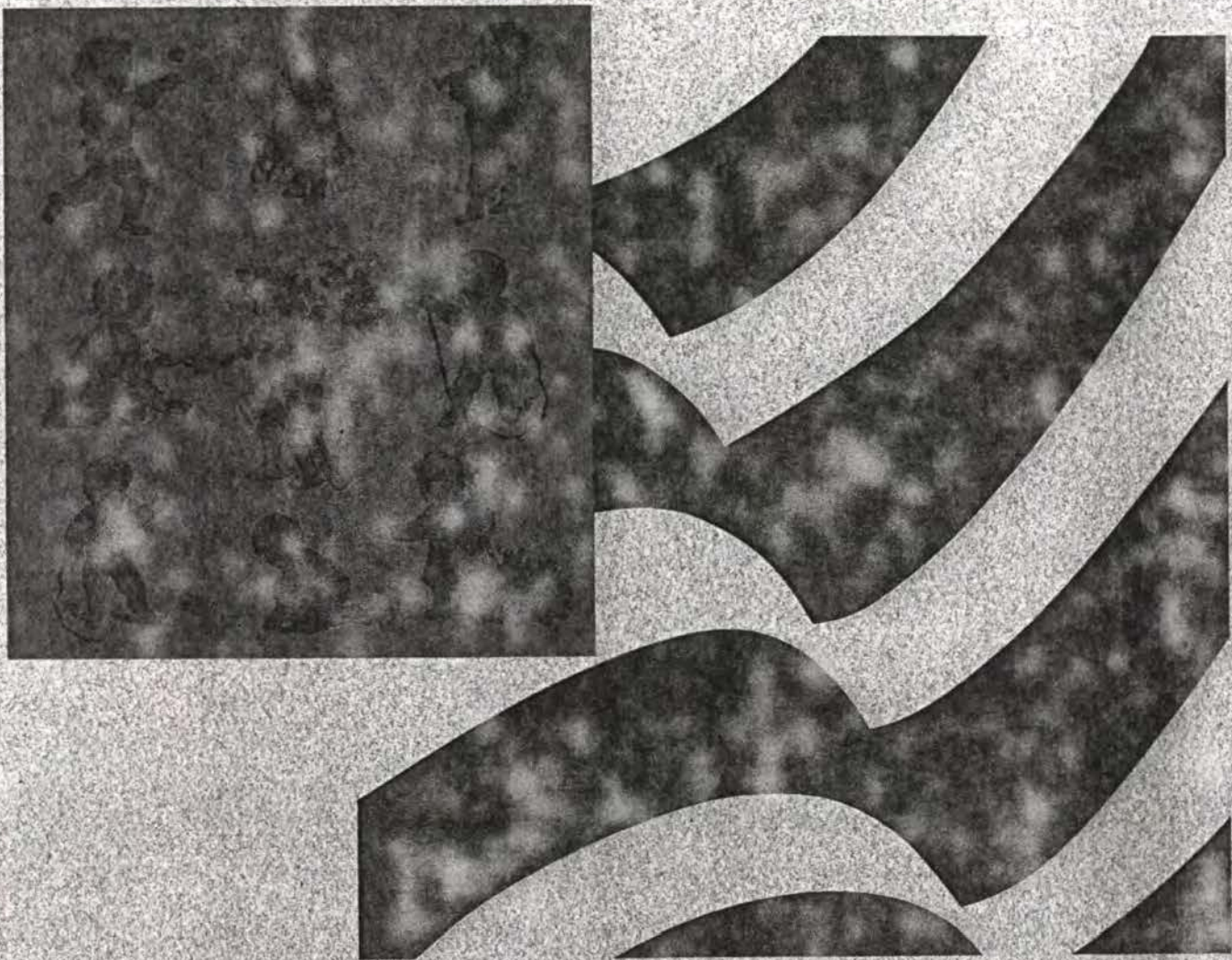
OutReach to Hard-to-Reach Population

A Better Start Pittsburgh, PA

A Better Start is a four-year Prenatal Outreach demonstration project funded through a public-private partnership between two private foundations and the Commonwealth of Pennsylvania's Departments of Health and Public Welfare. A Better Start has eight competitively selected program sites throughout Pennsylvania, each staffed by a site director, outreach workers, and other clinicians. Its goal is to develop a truly comprehensive prenatal care program for low-income women in Pennsylvania by adding a major outreach and psychological support component to the existing state and federally funded maternal care program. The program sets out to test different strategies to seek out pregnant women, to motivate them to initiate and remain in care through pregnancy, and to stimulate the continuity of care for their newborn infants.

Contact: Christine Mitchell-Weaver

Director, A Better Start
Office of Child Development
CL 2017, University of Pittsburgh
Pittsburgh, PA 15260
(412) 624-1188



IMMUNIZING
AMERICA'S
CHILDREN:

*Lauren
Simpson*



A MODEL WORKSHOP



409 12th Street, SW
Washington, DC 20024
(202) 863-1638

The Immunization Education and Action Committee (IEAC), a project of the National Healthy Mothers, Healthy Babies Coalition, organized an educational forum, "Immunizing America's Children: Spotlight on New Orleans," on December 8, 1993, as part of the National Child Health Leadership Conference in New Orleans, Louisiana. This workshop was designed as a model for organizations like yours to use in local communities to address the seriously low immunization rates around the nation.

As you know, President Clinton's Childhood Immunization Initiative declares that immunizing our preschool children is a top priority. Immunization rates in the United States are woefully behind those of many countries, including developing nations. By 1996, according to the President's initiative, 90 percent of 2-year olds in the U.S. should be fully vaccinated.

Because we know that a variety of factors contribute to low vaccination rates, the Professional and Public Education Subcommittee of the IEAC wanted to create a workshop format that would work in any community. We chose New Orleans because it is a large urban area with a significant underserved population.

The overriding theme of our workshop was that a single intervention is unlikely to lead to a sustained, long-term improvement in immunization rates. Rather a tremendous collaborative effort—by public health departments, private physicians, hospitals, day-care centers, pediatric nurses, civic groups, policy makers, and others—is necessary to achieve our nation's goal by 1996.

This workshop model provides an exciting hands-on opportunity for the exchange of innovative ideas and strategies for increasing access, reducing barriers, forming partnerships, and sharing information. We encourage you to make a workshop similar to this a focus of your activities during National Infant Immunization Week.

Karen Bodenhorn

Karen Bodenhorn, Chairperson
IEAC, Professional and Public Education Subcommittee



How to Start:

Contact the Immunization Program Director in your State Health Department for the name of your state's Immunization Action Plan (IAP) coordinator and the key local, state, and federal organizations to involve in planning. You may already know many of the people in this leadership group from the IEAC roster, the membership of your own coalition, or the work of your agency or organization. Be sure to include policy makers, public health agencies, volunteer groups, and the private sector. Try to bring all the key partners from your community on board in the beginning.

How to Organize:

It is important to have one person who is aware of everything going on, so select someone to coordinate the planning process. Adjust the membership of your planning committee if necessary. List the particular immunization needs you wish to address in your community. Target the priority audience for your workshop. Establish the date and location of your workshop. Assign duties to your advisory group members. **(Appendix A)**

How to Develop an Agenda:

Set goals and objectives for raising awareness and providing tools for improving immunization rates in your community. Some of the topics you may want to cover are: President Clinton's Childhood Immunization Initiative, the local immunization status, the role of the business community and

civic groups, how to support or participate in the state IAP, recruitment of providers, and the promotion of the "medical home" concept. Whether planning for a half-day or full-day program, consider organizing your agenda to permit speeches, questions and answers, discussion, mini-sessions, breaks, networking, and refreshments or a meal. **(Appendix B)**

How to Get Funding:

Approach local foundations and corporations that are involved in health care for support. Because corporations are often solicited for monetary support consider services that could be donated, such as a meeting room or copying. Expenses may include: a meeting room, AV equipment, invitations and other printed materials, copying, telephone, postage, travel, lodging, other per diem expenses, and a meal or refreshments. **(Appendix C)**

Tips For Success:

▼ Involve National IEAC Members in the Planning

Many members already have local immunization initiatives. Some can provide prominent speakers from their local chapters or affiliates. They also have access to a great number of resources.

▼ Utilize Volunteers Throughout the Process

Using volunteers from your community will increase visibility and public awareness, as well as enhance community involvement. Volunteers can also contribute resources such as time, ideas, and person power.

▼ **Generate Support Early from Key Constituencies by Inviting their Participation on Your Advisory Board and Planning Committee**

Corporations and hospitals, for example, can play a visible role by pledging to ensure all employees and their dependents are appropriately immunized. Note that the institutional approval process for commitments such as this can take a long time. Try to predict turf issues and disarm them before they become a problem.

▼ **Enlist Well-Known Leaders in the Public and Private Sectors**

Use them as keynote speakers to challenge the entire audience to action, or suggest they help you plan a plenary with deeper detail on a particular issue. Also ask them to invite their peers to attend the workshop.

▼ **Ask a Community Corporate Leader to Speak**

This is an excellent way to engage the business community's attention. In addition, they appreciate being asked to contribute in non-monetary ways. Often business owners do not realize how important they can be in increasing immunization rates for children beginning at the workplace. Many business owners want to help and get involved in the community but don't know where to begin. **(Appendix D)**

▼ **Include Representatives from a Variety of Racial and Ethnic Groups from the Community as Speakers, Panelists, and Members of the Planning Committee**

For outreach and immunization efforts in your community to be truly successful it must reflect sensitivity to the variety of racial and ethnic populations your community serves.

▼ **Plan a Resource Table**

Materials should cover the issues the workshop is addressing, such as the Guide to Contraindications to Childhood Vaccinations, and the Standards for Pediatric

Immunization Practices published by the Centers for Disease Control and Prevention (CDC). Include materials from participant organizations and successful immunization efforts. Have someone staff the table who is familiar with the materials and can guide participants to additional resources. This is a good place for hand-outs from speakers.

▼ **Send an Invitation with an RSVP**

Supply local IEAC affiliates with invitations to send to their membership. Ask other groups represented on your advisory board for names of children's and medical organizations, professional associations, volunteer groups, and businesses to invite. Provide invitation cards for all the speakers, moderators, and other key people to disseminate. **(Appendix E)**

▼ **Cultivate Media Coverage**

You will attract print and broadcast media with a prominent list of speakers and a strong advance pitch. Don't assume that the media understands the problem. In your press material and personal contact, explain why the low immunization rates are an issue they should be concerned about and how this workshop can begin remedying the problem. Always send out printed advisories, but it is most effective to make this pitch in person or by telephone. If your local newspaper, radio, or television stations have reporters specifically responsible for health issues, contact them. Invite the media two weeks in advance of the workshop, then remind them again 2-3 days in advance. Assign someone to assist the media during the workshop to set up interviews, provide access for photographers, and answer technical questions. **(Appendix F and G)**

▼ **Assign a Meeting Facilitator**

Have a facilitator at the meeting who will ensure that the meeting and transitions between the speakers runs smoothly. It is critical to have someone ensure that presenters don't go over their scheduled time.



▼ **Plan an Action-Oriented Agenda Tailored to the Diversity of Your Community**

While it is important to provide statistics and data for those less familiar with the problem, the purpose of the workshop is to provide tools for the audience to take away and apply. Offer success stories that spotlight outcomes and measure achievement. Consider holding simple audience participation exercises to illustrate the message.

▼ **Build in Time for Questions and Answers, Discussion, and Brainstorming**

Allow ample time for questions and answers from the audience. Moderators should solicit questions from the audience. Participants can develop strategies in mini-workshops. “How-to” sessions will permit hands-on training in such areas as “How to Develop a Speakers Bureau,” “How to work With the Media,” and “How to Support Your Local Immunization Action Plan (IAP).”

▼ **Make Networking One of Your Objectives**

A mid-morning and mid-afternoon break with refreshments or a luncheon after a round of speakers and workshops will allow participants to make new contacts in the community. It is key to provide an opportunity for participants to network.

▼ **Wrap Up the Workshop at the End**

To end the day's event your facilitator should highlight main issues raised in the meeting, summarize opportunities for institutionalizing vaccinations, such as the Vaccines for Children program, and ask individuals from the audience to recommend actions that should be undertaken. Participants should leave with clear priorities and a sense of urgency.

▼ **Ask Participants to Fill Out an Evaluation Form that Commits Them to a Personal Goal**

This will provide feed back on the workshop and solidify their involvement in your campaign. Follow up these commitments in 3-6 months with a follow-up survey, a second meeting, and/or an evaluation of immunization rates. An evaluation component is important to potential funders and being able to demonstrate an outcome will facilitate funding for future workshops or sessions. **(Appendix H)**

Immunization Education and Action Committee

Healthy Mothers, Healthy Babies
409 12th Street, SW
Washington, DC 20024
(202) 863-1638
Fax (202) 554-4346

Martin Smith, M.D.

Chair

Jo Ivey Boufford, M.D.

Co-Chair

Valencia Clarke Rodgers, M.S.W.

Project Director

Background

The Immunization Education and Action Committee (IEAC) was formed in response to the major effort needed to educate parents and guardians of the importance and effectiveness of today's vaccines. It was clear that the increasing demand for vaccination services needed to coincide with development of a cadre of information systems in both public and private sectors to meet the increased demand.

An undertaking of this magnitude required the cooperation and coordination of a broad variety of agencies and organizations in both public and private sectors. The office of the Surgeon General, U.S. Public Health Service, and the National Immunization Program, Centers for Disease Control and Prevention formed the IEAC under the auspices of the National Healthy Mothers, Healthy Babies Coalition to promote the vaccination of preschool age children.

IEAC Members

This broad-based collaboration includes the following types of organizations:

- ▼ **Provider Organizations:** To assure that physicians, nurses, and other providers are fully implementing current recommendations to take advantage of all opportunities to vaccinate and to reduce barriers to immunization.
- ▼ **Parent/Guardians:** To inform them of the importance and effectiveness of the timely vaccination of their children.
- ▼ **Nongovernmental Organizations:** To educate and motivate parents and guardians; to educate community leaders of the needs and benefits of immunization. Among these groups are those who are known to work effectively to serve the needs of communities of color.



Mission Statement

I. The Immunization Education and Action Committee (IEAC) is an issue committee of Healthy Mothers, Healthy Babies, which is comprised of national organizations in the public, private, and non-profit sectors. The purpose of the IEAC is to achieve and maintain full immunization of at least 90% of all children in the United States by their second birthday, particularly children of ethnic and racial minorities and those in underserved communities. The IEAC provides national leadership through:

- ▼ Coordinating development and distribution of parent/caregiver education materials and practices;
- ▼ Facilitating implementation of effective practices in outreach and service delivery at the local level;
- ▼ Fostering collaboration among national IEAC members, and their state and local affiliates;
- ▼ Serving as a forum for identifying and promoting policies and practices that will improve and maintain child immunization rates at a high level; and
- ▼ Developing informed and effective advocates for full immunization of all children by their second birthday.

II. To accomplish this mission the IEAC will operate the following committees:

A. Steering Committee

The Steering Committee will coordinate the activities of all of the subcommittees. This will include developing and assigning projects to support the mission, reviewing committee originated projects, and assisting the subcommittees in determining priorities. The committee will develop policy related to organizational development (e.g., selection of Steering Committee members, appointment of subcommittee chairs, etc.), and resource allocation.

B. Professional and Public Education Subcommittee

The Professional and Public Education Subcommittee will coordinate development and distribution of parent/caregiver and provider educational materials and practices that will:

- ▼ Inform parents/caregivers of the need for and the effectiveness and safety of vaccines;
- ▼ Educate parents/caregivers about the risks of delaying completion of immunization until mandated by one or more laws or regulations (e.g. daycare or school entry);
- ▼ Encourage community and opinion leaders to make their communities aware of the need for immunization and the need to make immunization services more widely available and easily accessible and to determine what priority immunization is for the community;
- ▼ Encourage professionals to reinforce the need for parents/caregivers to obtain the recommended immunizations on time and to know about the benefits and risks of vaccines administered;
- ▼ Reinforce the need for health care providers to know and implement the "Standards for Pediatric Immunization Practices"; and
- ▼ Assist professionals in understanding how to utilize community outreach effectively and overcome cultural and linguistic barriers as well as religious objections to immunization access and follow-through.

C. Coalition Building Subcommittee

The Coalition Building Subcommittee will encourage, support, and participate in national and local coalitions to facilitate implementation of an integrated approach to link families with immunization services and remove barriers to service delivery by:



- ▼ Developing organizational policies which foster collaboration;
- ▼ Providing information about materials, resources, and technical assistance in building and maintaining local coalitions;
- ▼ Sharing information about effective coalition models;
- ▼ Creating/designing vehicles for collaborative activities (such as National Infant Immunization Week and regional, state, or local conferences of immunization partners); and
- ▼ Promoting local immunization coalitions that can also be used to facilitate linkage and access to other health care and community services.

D. Policies and Practices Subcommittee

The Policies and Practices Subcommittee will serve as a forum for identifying and promoting policies and practices that will improve child immunization rates at a high level by:

- ▼ Facilitating sharing of information about immunization registries and reminder/recall systems;
- ▼ Identifying and disseminating information about opportunities to link immunization services to other services used by families with children under two;
- ▼ Promoting objective assessments of service delivery policies and practices to determine which are most effective in achieving and maintaining high immunization rates; and
- ▼ Advocating for wide adoption of “best practices” that are demonstrably effective.

How To Join The Effort

For further information you may contact

Christine De La Torre
Program Associate
Immunization Education and Action Committee
409 12th Street, SW
Washington, DC 20024
(202) 863-2414

or

Conrad P. Ferrara
National Immunization Program
Centers for Disease Control and Prevention
(404) 639-8204

Thanks!!

10TH STORY of Level 1 printed in FULL format.

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Sun-Sentinel (Fort Lauderdale)

November 29, 1994, TUESDAY, FINAL EDITION

SECTION: LOCAL, Pg. 1A, SUN SENTINEL SANTA

LENGTH: 1014 words

HEADLINE: DREAMS OF HOME ;
MOM FIGHTS TO KEEP A ROOF OVER HER FAMILY'S HEAD.

BYLINE: KATHLEEN KERNICKY; Staff Writer

BODY:

All that Ardrex, Latricia, Anton and Janardo really want for Christmas is a home of their own.

Their mother, Edith Stafford, has been their sole support since her husband left two years ago. The family has moved from shelter to shelter, struggling to stay together, worrying about where they might land next.

For Stafford, the dream of becoming independent, getting a good job and buying a home for her children seems to keep slipping away.

Last spring, Stafford lost her job embroidering clothes in a factory.

A failed attempt to reconcile with her husband left her pregnant with a fifth child, due on Jan. 4.

Stafford, 26, landed on the doorstep of Healthy Mothers-Healthy Babies Coalition of Broward County, a private, nonprofit agency that provides free prenatal care and support for poor women.

Trying to make a better life for herself and her children sometimes seems like a losing battle. But Stafford hasn't given up.

She now has a small apartment in Fort Lauderdale for her family and is studying for a high school diploma at Old Dillard Community School. She has learned to sew so she can make her children's clothes and save money.

Stafford wants to go to college and become an elementary school teacher, maybe work as a teacher's aide along the way. She wants to get off the welfare and public assistance that feeds and supports her children.

"At the last shelter, I told them, "I don't want to be on welfare," she said. "I said, 'I'll make my way out of this.'"

-- The plight of Stafford and her children is not uncommon.

Of the 114 women who received intensive support services in the past year from Healthy Mothers-Healthy Babies, 88 were single mothers.

According to samplings from the 1990 U.S. Census, 22 percent of the estimated 51,303 Broward County households headed by women lived below the poverty

Sun-Sentinel (Fort Lauderdale), November 29, 1994

level. Of those women with children under age 5, the number climbs to 46 percent.

Women such as Stafford, who lack job skills or education, often feel trapped, said Randee Lefkow, Healthy Mothers' executive director.

"These women may find it much harder to complete their education and therefore qualify for better jobs," Lefkow said. "It's the cycle of poverty."

Healthy Mothers-Healthy Babies strives to teach mothers such as Stafford how to navigate the maze of social services agencies to help them find housing, transportation, day care or job training.

"Often, the support system is lacking for single mothers," Lefkow said. "They bear the sole burden of a great amount of responsibility. Not only to make a living to feed and clothe the children, but often being the only one around.

"It greatly affects the children. Even in the simple things, like a mother having time to read to her child. Some of those things go by the wayside, and it's by no intent of being a bad parent."

Just getting by, day to day, is a struggle. Stafford, for instance, is on a waiting list for subsidized housing that could take as long as 10 years.

"Edith is trying her best to be responsible and take care of her children and better herself and them," Lefkow said. "She runs into so many roadblocks just in the matter of trying to live. People think that women like this are getting rich off welfare. ... These are not people who just want to take handouts. These are people who are trying to help themselves."

-- Finding housing and day care have been Edith Stafford's biggest obstacles to working.

Last year, the family moved out of a shelter for homeless families where tenants sold drugs from their apartments. One night, a man broke in through her bedroom window at the shelter. He attacked Stafford while the children slept in the same room, pounding her head on the floor each time she cried out.

From there, the family moved into a women's shelter before finding a small, two-bedroom apartment in Fort Lauderdale.

Stafford uses her public assistance money to pay the \$ 87 weekly rent. She doesn't have a car, and only a few pieces of furniture.

She walks to her classes at Old Dillard while her older kids are in school. She brings 2-year-old Janardo to her school's nursery.

Stafford leaves school by 2:30 p.m. so she can meet Ardrex, Latricia and Anton at the bus stop.

Stafford's wish is to make a better life for her children.

Unwilling to dress them in hand-me-downs, she labors over an old second-hand sewing machine at home to make their clothes. She also makes her maternity clothes.

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In one week, Stafford made matching outfits for all four kids. She bought the bright-colored fabric for \$ 1.50 a yard and worked over a weekend.

"She came in Monday and put in the sleeves and the button holes, the little finishing touches," said Marva Johnson, her instructor in custom garment-making at Old Dillard. "She wants them to look nice. The older kids brag on her, 'Look what my mama made.'" Johnson said Stafford is good enough to become a seamstress.

"She's becoming independent, and that's what we're trying to accomplish," Johnson said. "She never gets frustrated or aggravated. She doesn't give up. I know she can do anything."

-- Last Christmas brought Ardrex, 7, Latricia, 5, Anton, 4, and Janardo, 2, a pair of shoes and one gift donated by the Salvation Army.

This Christmas will be spent in their small apartment that's barely big enough for a Christmas tree. There will be no tree.

None of the children has ever owned a bicycle, something all of them wish that Santa Claus would bring. Latricia wants a black Barbie doll, while the boys ask for Power Rangers, racing cars or a Super Nintendo. Their mother would like them to have educational toys or books.

Every night, the children pray before they go to sleep.

"God bless us and protect us and help us to be good children."

This Christmas, Edith Stafford has a prayer of her own: "I pray to God that one day He will bless us with a home of our own or a more secure place to live. My children would love a place of their own. Until this happens, we'll settle for the cheers and wondrous feeling Christmas brings."

GRAPHIC: Staff photo, JOHN CURRY (color) Edith Stafford with her children, clockwise from upper left, Ardrex, Anton, Latricia and Janardo.

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