



USING LEGAL SERVICES  
AS PART OF A  
COMMUNITY STRATEGY  
TO IMPROVE  
MATERNAL AND CHILD HEALTH



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# Today's Agenda

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## Introductions

Objectives  
Faculty

2

## Subcohort Activity

Icebreakers  
Comfort Break

3

## Presentations

Guest Speakers  
Lessons for the Day  
Faculty Remarks

4

## Closeout

Homework  
Next Session



# Learning Collaborative Objectives

1. **Understand how unmet legal needs can negatively impact maternal and child health outcomes**
2. **Collaborate across health and legal settings to develop strategies and plans for integrating civil legal services, e.g, such as MLP activities, with your health center's maternal and child health priorities.**
3. **Identify a priority focus area and resources**, such as screening or a policy intervention to improve maternal and child health outcomes in your communities in a sustainable way.
4. **Engage in continuous learning and improvement** by sharing lessons learned, challenges and questions with other participating teams and faculty.



# Meet the Faculty



**Ada Fenick, MD, FAAP**  
Yale School of Medicine



**Vicki Girard, JD**  
Georgetown University  
Health Justice Alliance



**Loral Patchen, PhD,  
MSN, MA, CNM, IBCLC**  
Medstar Washington  
Hospital Center



**Roxana Richardson, JD**  
Georgetown University  
Health Justice Alliance



**Alice Rosenthal, JD**  
Center for Children's  
Advocacy



# Today's Special Guests



**Funmi Makinde, MPH**  
Association of American Medical Colleges  
Center for Health Justice



**Kimá Taylor, MD, MPH**  
Anka Consulting, LLC



Icebreaker Activity

# Get to Know your Cohort

**What is your...**

Name

Title

Organization Name & Location

Favorite Children's Book



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Icebreaker Activity

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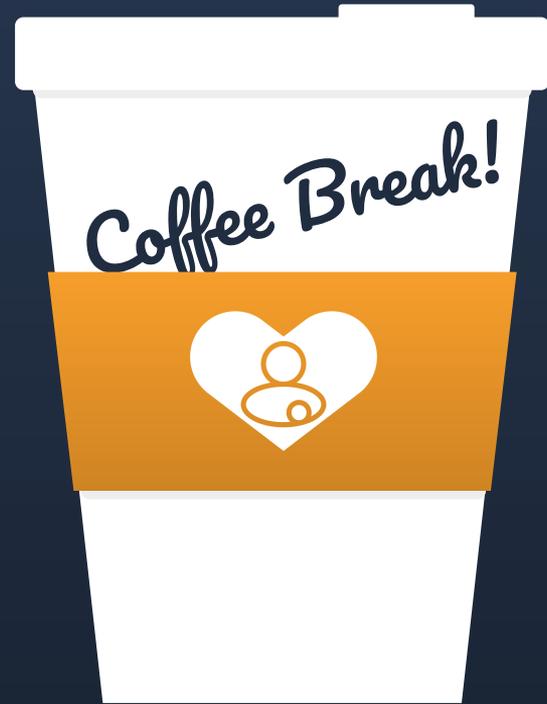
Name

Title

Organization Name & Location

Favorite Children's Book

We will  
continue  
in 3 minutes.



# Introducing our Guest Speaker



## Funmi Makinde, MPH

# Disparities and Social Barriers for Maternal Health

**Funmi Makinde, MPH, CHES**  
**Health Equity Research Analyst,**  
**AAMC**

**March 3, 2022**

# AAMC Center for Health Justice

- Created in response to one of the main goals within AAMC's strategic plan.
- Aims to build a case for health justice through strategic, innovative, and community centered collaborations.
- Grounded in community engagement, bidirectional partnership, and the belief that solutions for health equity do not lie solely within the field of medicine.
- Key areas of focus include the Principles of Trustworthiness, Maternal Health Equity, and Data for Health Equity.

Learn more about the Center by visiting [aamc.org/healthjustice](https://aamc.org/healthjustice).

# Historical & Present Context

- Maternal health disparities have negatively affected racial/ethnic minority groups in the U.S. for years, dating back to slavery.
- According to the CDC, Black and American Indian/Alaska Native (AI/AN) birthing persons are 2-3 times more likely to die from pregnancy-related complications than their White counterparts.
- The disparity increases with age and exists across all age groups and education levels.
- Both maternal mortality (**and** morbidity) disparities are present even when controlling for factors such as education and income.

## Source:

<https://www.cdc.gov/mmwr/volumes/68/wr/mm6835a3.htm>



**Kira  
Johnson**



**Shalon  
Irving**



**Stephanie  
Snook**



**Serena  
Williams**

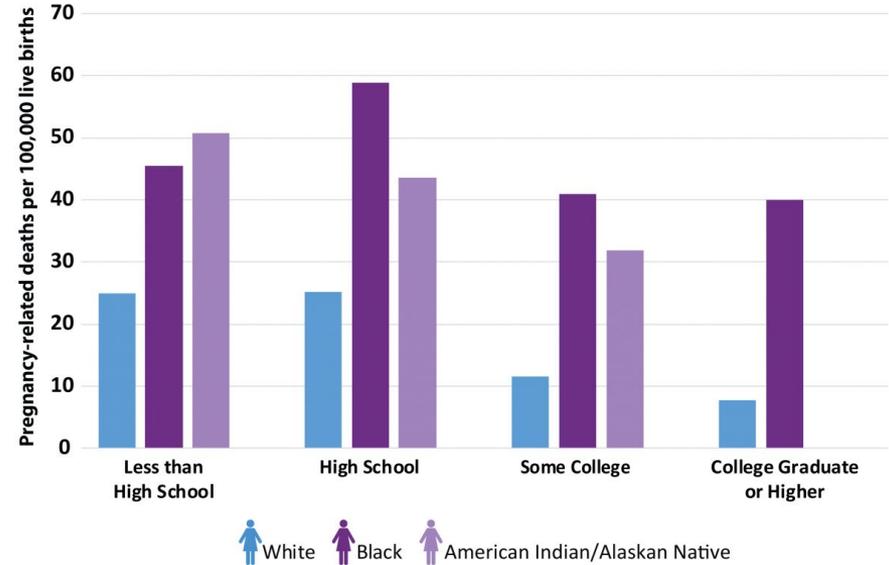
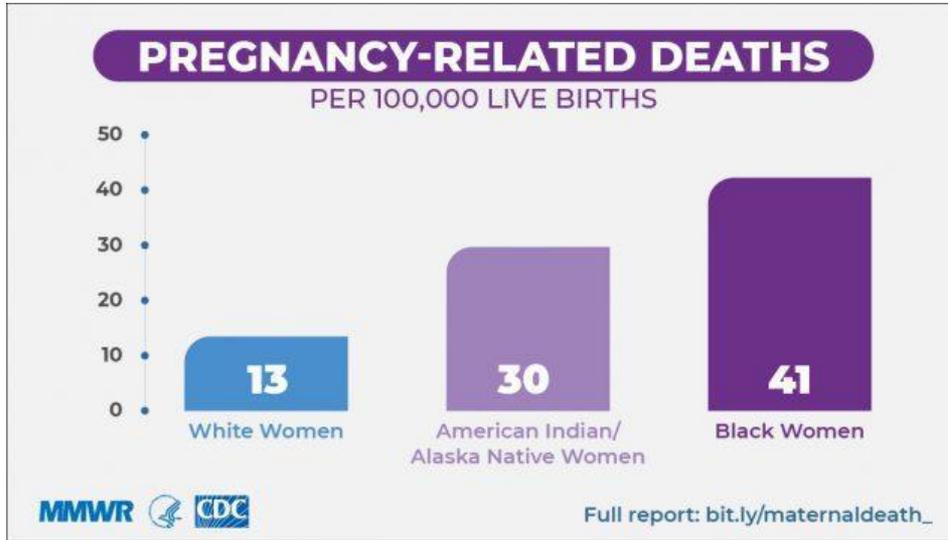


**Allyson  
Felix**

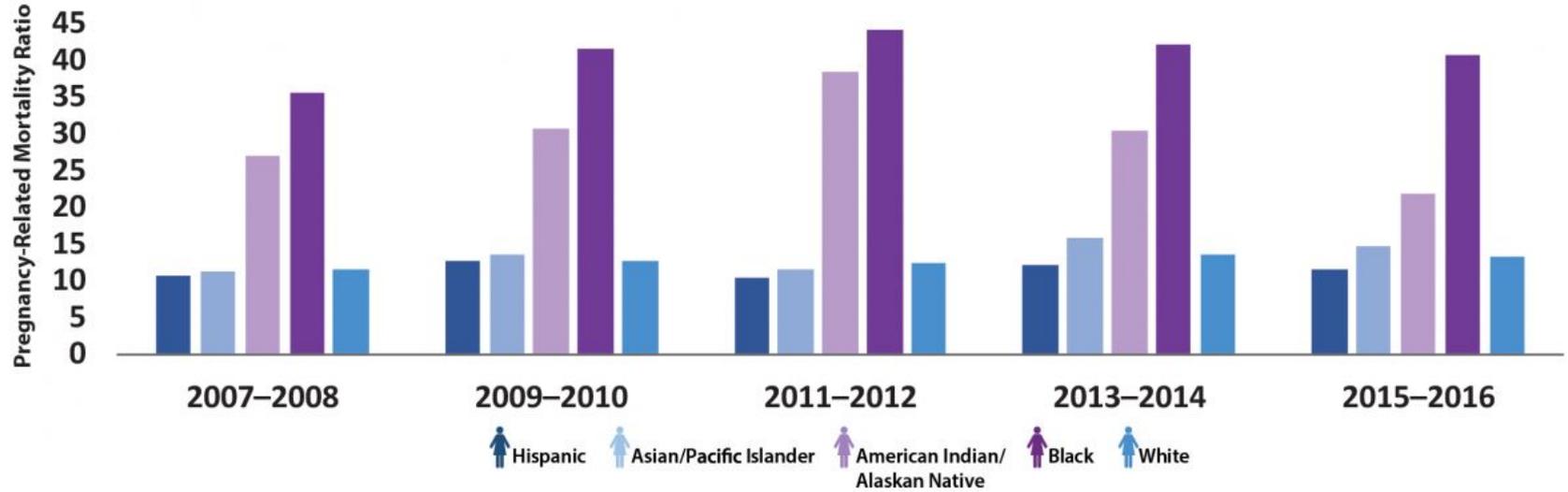


**Beyoncé'  
Knowles-Carter**

# Historical & Present Context (cont.)



# Historical & Present Context (cont.)



# COVID-19

The pandemic has also presented new challenges for birthing people, who had to navigate:

- imposed isolation or separation from partners and support systems during critical parts of their care journey;
- alternate, delayed, or no care due to fear of risking COVID-19 exposure and
- mistrust in the health care system, exacerbated by the paucity of data (though growing) on the impacts of COVID-19 on pregnancy and birthing outcomes.

**Source:**

<https://www.urban.org/sites/default/files/publication/104306/maternal-health-inequities-during-the-covid-19-pandemic.pdf>

# Root Causes & Systemic Barriers

- Maternal health is impacted by factors beyond clinical care, and multisector collaborations are necessary to achieve maternal health equity
- Factors such as transportation, environment, housing, education, and other social determinants of health can contribute to or exacerbate poor health outcomes for birthing persons.
- Structural racism/"weathering" also cited as key contributors
- Other considerations include gaps in care access/coverage, workforce, and data

# How Do We Move the Needle?

## **A**dvocacy

- Social determinants of health
- Workforce development

## **A**ccountability

- Multisector data collection/sharing
- Quality improvement evaluation

## **A**uthentic community engagement and humility

- Principles of Trustworthiness

# Maternal Health at AAMC

The AAMC works to **raise awareness** of the severity and complexity of maternal health disparities, **advocate** for related policy solutions, and **support innovative research** to eliminate inequities that threaten the health and wellbeing of all birthing persons.

The AAMC Center for Health Justice develops resources, convenes experts, and provides opportunities to strengthen efforts around maternal health.

- External/internal workgroups
- Health Impact Assessments
- Public Polling
- Maternal Health Incubator

<https://www.aamchealthjustice.org/our-work/maternal-health-equity>

# THANK YOU!

**Please feel free to reach out with any questions.**

[healthjustice@aamc.org](mailto:healthjustice@aamc.org)

[omakinde@aamc.org](mailto:omakinde@aamc.org)

**You can also stay connected by following @AAMCjustice on Twitter and signing up for our newsletter at [aamchealthjustice.org](http://aamchealthjustice.org)**

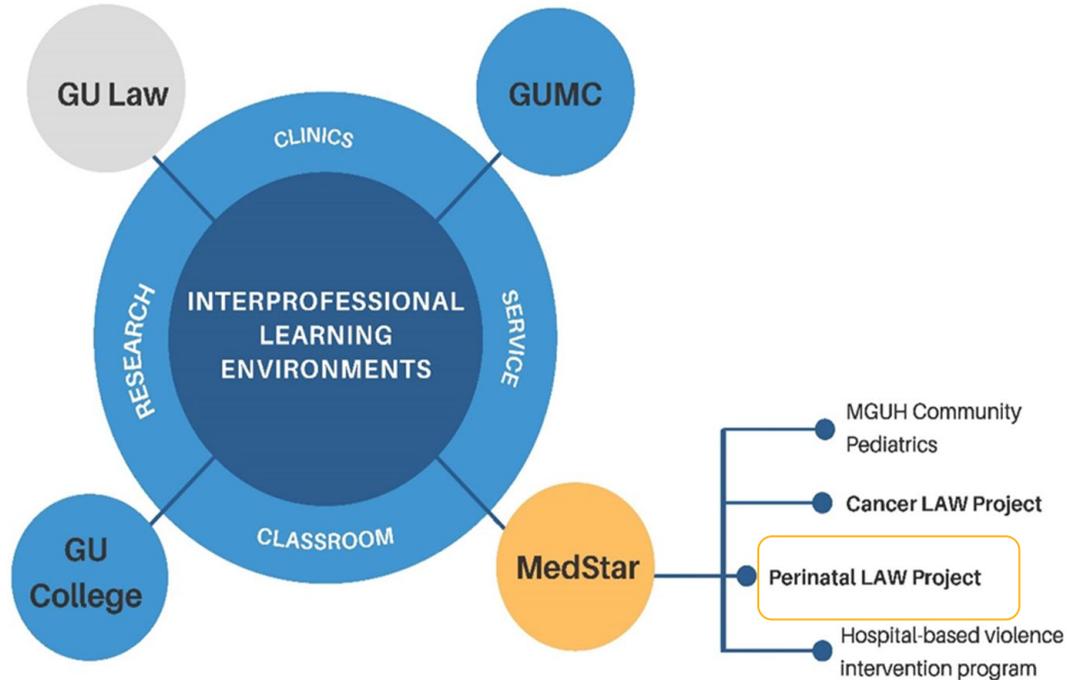
# Introducing our Guest Speaker



## Dr. Kimá Taylor



# Georgetown University Health Justice Alliance





# Perinatal/Maternal Health-Specific Literature



Housing insecurity during pregnancy associated with increased risk of low birth weight and/or preterm birth and extended hospitalization <sup>1</sup>



Food insecurity/material hardship is associated with perinatal/maternal depression and anxiety <sup>2</sup>



Low birth weight and preterm births are increased among women exposed to domestic violence <sup>3</sup>

1. Severe housing insecurity during pregnancy: Associated with adverse birth and infant outcomes; Leifheit et. al.; 2020

2. Material hardship and mental health symptoms among a predominantly low income sample of pregnant women seeking prenatal care; Katz et. al.; 2018

3. Maternal exposure to domestic violence and pregnancy and birth outcomes: a systematic review and meta-analyses; Shah et. al.; 2010

# Center for Children's Advocacy & Yale New Haven Children's Hospital



@drmaypole

# Center for Children's Advocacy & Yale New Haven Children's Hospital



To improve health outcomes for children of families with low-income through interdisciplinary medical-legal collaboration in the health care/clinical setting.



# CENTER FOR CHILDREN'S ADVOCACY & YALE NEW HAVEN CHILDREN'S HOSPITAL



ADDRESSING  
PATIENT'S HEALTH  
HARMING LEGAL  
NEEDS



Didactics  
Experiential  
Resources

**Education  
& Training**

**Systemic  
Advocacy**

Translate patient advocacy  
to systemic change

**Consultation &  
Representation**

Consultation to Providers  
Direct to families

# Center for Children's Advocacy & Yale New Haven Children's Hospital



- \*Legal issues impacting children's health - what makes child MLP's different?
- \*Patient story - MLP in action (a.d.a. Case study)
- \*Nuts and bolts of YNHCH CCA MLP
- \*Deep dive into the three-legged stool
- \*Implementation strategies for your site



QUESTION

AND

ANSWER

\* NCMLP will email an updated Welcome Packet with the homework after every session.

# Homework Questions

## Health Care Team

1. What are the non-medical barriers your patients face that negatively impact health or make it difficult for you to deliver care? What do you think are the most prevalent?
2. How (if at all) do you try to address these needs? Have you ever engaged patients with legal services and how has that gone?
3. What are you most interested in learning more about based on the first session?

## Legal Services Team

1. What types of legal issues do you see relating to Maternal or Child Health in your practice?
2. Do you receive referrals from any medical partners? A formal MLP?
3. For legal issues your team does not address, what do you do?
4. What areas of your practice would benefit from direct healthcare provider input or expertise? (e.g., letters, testimony, medical explanations, medical record reviews, etc.)
5. What are you most interested in learning more about based on the first session?



# Next Session

March 17, 2022, 2-3 PM ET  
with a focus on Maternal Health

led by **Georgetown University Health Justice Alliance**

Contact Danielle Rahajason [nrahajas@gwu.edu](mailto:nrahajas@gwu.edu) for assistance.