WEDNESDAY, AUGUST 13, 2025

# Power to the People: Centering Families to Transform Maternal & Infant Health





# Today's Agenda

- Welcome & Introduction
- The Role of CCHI and Six Dimensions
- The Clinical Partners in CCHI
- The Community in CCHI
- Audience Q&A
- Call to Action
- Final Remarks











### Welcome & Introduction

Nakeitra L. Burse, DrPH, CHES
Founder and Executive Director,
Six Dimensions



Centering Families to Transform Maternal & Infant Health







# WHO WE ARE

Six Dimensions is a woman led, Mississippi-based nonprofit organization focused on improving maternal health outcomes.

Established in 2016, but in 2023, we made the transition to nonprofit organization from for profit in order to better serve our community.

# OUR TEAM



**Nakeitra L. Burse, DrPH, CHES**Founder | Executive Director



**Asia Rush, MPH, CHES**Program Manager



Chelsie Dorsey
Outreach & Advocacy
Coordinator



### **OUR MISSION**

Our mission is to enhance Black maternal health outcomes through:

- Rigorous research
- Comprehensive training
- Proactive outreach, &
- Impactful advocacy

We are dedicated to honoring history, respecting culture, and amplifying the voices of the community as we strive for positive change in maternal healthcare.



#### MISSISSIPPI DATA

- In Mississippi between 2016 and 2020, there were a total of 167 maternal deaths occurring during pregnancy or within one year of the end of pregnancy.
- The MS pregnancy-related mortality ratio is 42.2 deaths per 100,000 live births.
- The pregnancy-related mortality ratio for Black women in Mississippi is 65.1 deaths per 100,000 live births, four times the White ratio of 16.2.

#### MISSISSIPPI DATA

- The pregnancy-related mortality rate was highest (81.5 per 100,000 live births) in women within the 35-39 age group from years 2016-2020.
- During the five-year period (2016-2020), the majority (43%) of pregnancy related deaths occurred in women who were pregnant, 43 days up to 1 year post pregnancy and before death.
- During the five-year period (2016-2020), 80% of pregnancy-related deaths were deemed preventable.
- Of all pregnancy-related deaths between 2016-2020, 92.3% had some level of chance to alter the final outcome (death).
- From 2016-2020, there were a total of 167 pregnancy associated deaths in which 39% were pregnancy related.

# UNDERSTANDING MISSISSIPPI'S HEALTHCARE CRISIS: A HISTORICAL LENS

- Legacies of racial segregation in healthcare
- Rural disinvestment & policy neglect
- Distrust, disparities & Inequities in health

# HOW WE ARE CENTERING COMMUNITY:::





### RESEARCH



# TRAINING & DEVELOPMENT



OUTREACH & ADVOCACY

# RESEARCH

Through our research we aim to:

- Bridge the gap between researchers and community
- Support the need for birth workers as part of the maternal health team
- Understand the ongoing and evolving needs of Black mothers in Mississippi

# Training & Development













# OUTREACH

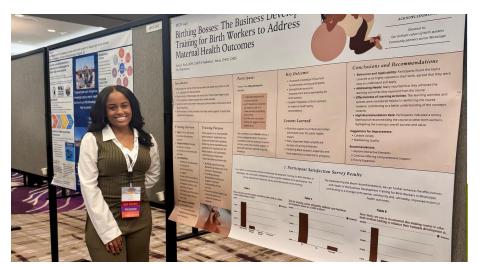


















# ADVOCACY



















#### RADICALLY REIMAGINING HEALTHCARE IN MISSISSIPPI

- From scarcity to sovereignty
- From institutions to ecosystems
- From transactions to trust
- From extraction to investment
- From silence to story
- From "fixing" to listening







#### The Role of CCHI and Six Dimensions

Stacy Scott, PhD, MPA, CSJ Vice President NICHQ





#### **Our Mission**

Community-Centered Hospital Initiative (CCHI) aims to create a roadmap in which communities will lead and collaborate with trusted community-based organizations (CBOs), healthcare entities, and Perinatal Quality Collaboratives (PQCs), focusing on joint initiatives to optimize health outcomes for mothers, birthing families, and infants.









#### • • •

### Creating a Roadmap that Leads to Success

- The key is to define success not just in terms of outputs or metrics, but also in building trust, centering community voice, and enabling transformative change, even if that change is gradual and requires persistent, thoughtful navigation of challenges.
- Ultimately, the innovative, community-driven strategies developed through CCHI will contribute to measurable improvements in maternal, pregnancy, and infant health outcomes.







### Radical Imagination

- Using our radical imagination to address complex systemic issues requires a willingness to step outside traditional, linear thinking.
- Building trust and psychological safety within the team and with external partners is crucial for allowing the flexibility and openness required for this type of transformative work.















### The Clinical Partners in CCHI

Sharla Smith, BS, MPH, PhD
Founder and Executive Director,
Kansas Birth Equity Network

# KANSAS BIRTH EQUITY NETWORK: TRANSFORMING BLACK MATERNAL HEALTH THROUGH COMMUNITY

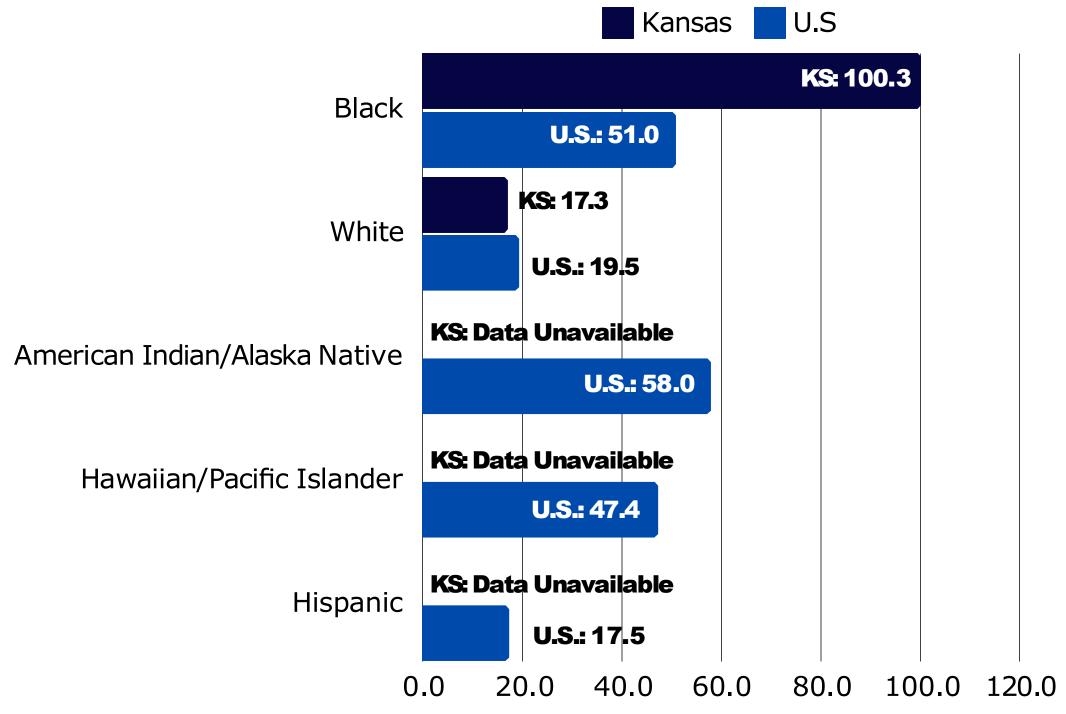
SHARLA SMITH, PHD, MPH
ASSOCIATE PROFESSOR, POPULATION HEALTH
FOUNDER AND DIRECTOR, KANSAS BIRTH EQUITY NETWORK
UNIVERSITY OF KANSAS MEDICAL CENTER

# Kansas Birth Equity Network



# THE DISPARITIES IN KANSAS!

# Maternal Mortality: Kansas



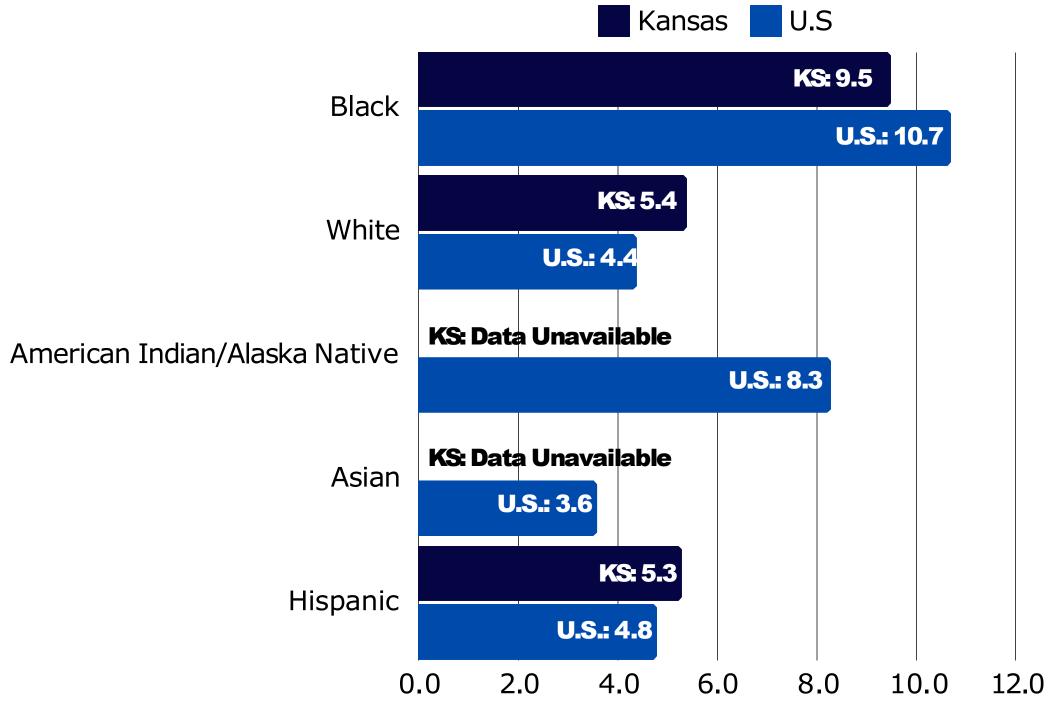
In Kansas, Black women and birthing people are **5.8** times more likely to die from pregnancy related issues than white birthing people.

Deaths per 100,000 live births



America's Health Rankings, 2025 Data Years: 2018-2022

## Infant Mortality: Kansas



In Kansas, Black infants are 1.8 times more likely to die than white infants.

Deaths per 1,000 live births



America's Health Rankings, 2025 Data Years: 2021-2022

THE WHY?

#### WEATHERING

Discrimination and marginalization can also slowly chip away at one's health, causing those who are at the receiving end of discriminatory attitudes to age or even die prematurely.

> The term "weathering" was coined in 1992 (Trusted Source by Dr. Arline Geronimus.)

> > The health of African American women may begin to deteriorate in early adulthood as a physical consequence of cumulative socioeconomic disadvantage.

They pull out one piece at a time, at a time, and another piece and another piece, until you sort of collapse.

#### WEATHERING

\$ Illustrate Change

Higher cortisol levels from being in a constant state of fight-or-flight are one result of this increased stress. Chronic stress can contribute to a wide range of negative health outcor over time, from depression and migraines to hypertension and heart disease. A recent st found Black adults had a biological age that was 2.6 years older than their chronological age compared to White adults who had a biological age of 3.5 years younger than their chronological age.

Chidiebere lbe, 2022, obtained from www.illustratechange.com





TELOMERE DUE TO ACTUAL

TELOMERE SHORTENING DUE TO

50-year-old Black woman (without weathering)

50-vear-old Black woman (with weathering)

#### **BRAIN**

TENSION HEADACHES, DIFFICULTY CONCENTRATING, IRRITABILITY, LOW ENERGY

#### HEART

HIGH BLOOD PRESSURE, HIGH CHOLESTEROL, AND TENDENCY FOR HEART ATTACK

#### REPRODUCTIVE -

SYSTEM THERE COULD BE IRREGULARITY

IN MENSTRUAL CYCLE, FERTILITY ISSUES, AND LACK OF SEXUAL DESIREHEART ATTACK

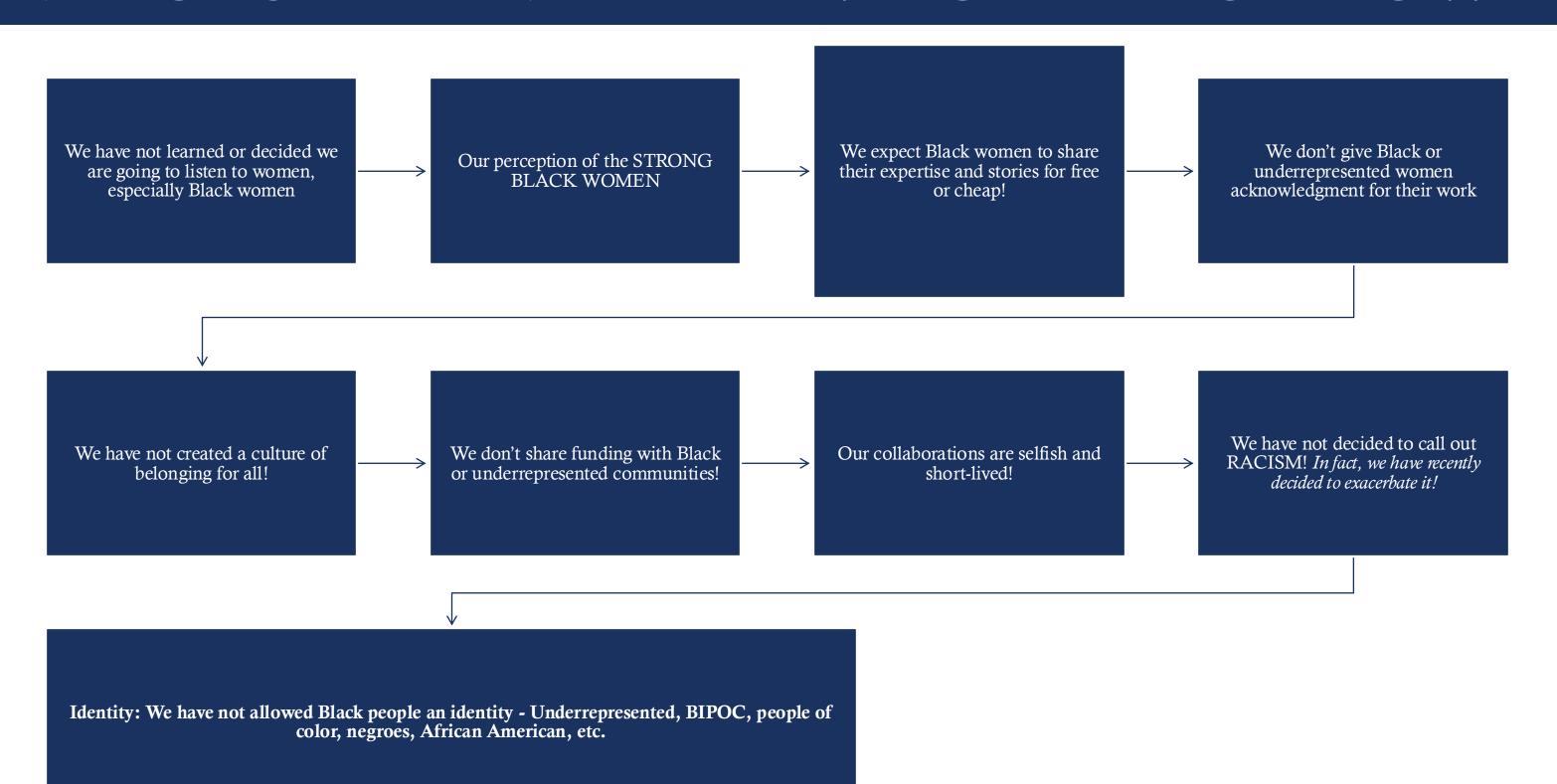
#### JOINT -

EXCESSIVE JOINT AND MUSCLE PAINS





# PERCEPTIONS AND IDENTITY THEFT: WHO CONTROLS THE NARRATIVE OF BLACK POWER?



THERE IS HOPE

BLACK FAMILIES

ARE MORE THAN

THE DATA AND

THE NARRATIVE!



# MISSION AND VISION

KBEN Vision: Every Black mom, dad, and infant receives quality and intentional prenatal, neonatal, and postpartum care in the state of Kansas.

CD366 Vision: Every Black mom, dad, and baby celebrates the baby's first birthday.

# Kansas Birth Equity Network



#### Who We Are

#### Our Root: Community

- Collaboration with Divine Nine Chapters in Wichita, KS
  - Raise awareness
  - Develop solutions
  - Celebrate Black Families: Celebrate Day 366

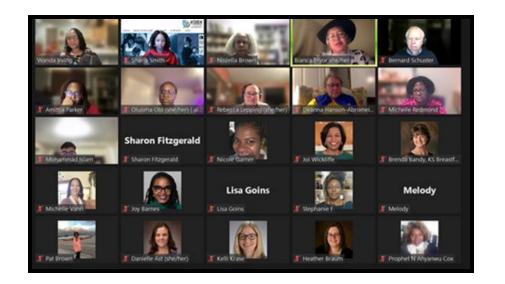
#### Today:

- Community-Centered Network
- Members across Kansas & KC Metro
- Diverse Members: birth workers, clinicians, parents, community members, & more!
- Center the experiences of Black families
- Create space for collaboration
- Celebrate Black Babies & Families
- Develop solutions that improve the health of Black families









# Our Approach

#### **KBEN Definition of Birth Equity**

Shifting the focus from blaming Black mothers and birthing people for their health outcomes to holding systems accountable—demanding policies, programs, and reparative action that acknowledge and heal historical trauma.





#### Kansas Birth Equity Network

#### Research

Research Agenda/Solutions List

#### **Areas of Focus:**



#### Maternal & Infant Health Research

Pregnancy Related Hypertension & Preeclampsia Prenatal Care Maternal Mental Health



#### **Healthcare Systems**



**Policy & Advocacy** 



MATERNAL & CHILD HEALTH

FIVE-YEAR RESEARCH

AGENDA ON BLACK

Kansas Birth Equity Network

February 2022



## Capacity Building

Healthy Blue Mini Grants

\$50,000 in Mini Grant Funding

01

#### Male Postpartum Mental Health

Rodney Copridge

A conversation centered on mental health for fathers in the postpartum period.

#### Weekend of Washing: Family Day

02

Kimberly Weaver

Adds a Saturday Family Day to an existing free laundromat initiative that is typically on the 3rd Monday of each month.

#### Perinatal Mental Health

03

Dr. Amittia Parker

Where, When, How does perinatal mental health screening occur in the KC Metro?



#### **Broderick Crawford Birth Equity Mini Grants**

Sistahs Can We Talk Health Fair	Children's Mercy Hospital: Community Support Funds
Dope Black Dads Fatherly Celebration	Joyea Marshall: Community Support Grant
Sister Doula Film Screening Event	Nozella Brown: Transformative Women's Experience
Dope Black Dads: New Dad Workshops	Kyle Ellison: Women's Health Song
Queens Village Maternal Healing Meetups	Storytailor: Stories about Maternal and Infant Health
Topeka Doula Project: Black Maternal Health Week Event	Event Funding for Health of the Community
Gestational Diabetes Project	Event Funding for Health of the Community
Diamonds N Rough: Mens Postpartum Workshop	Event Funding for Health of the Community

Supporting & Amplifying Existing
Community Efforts

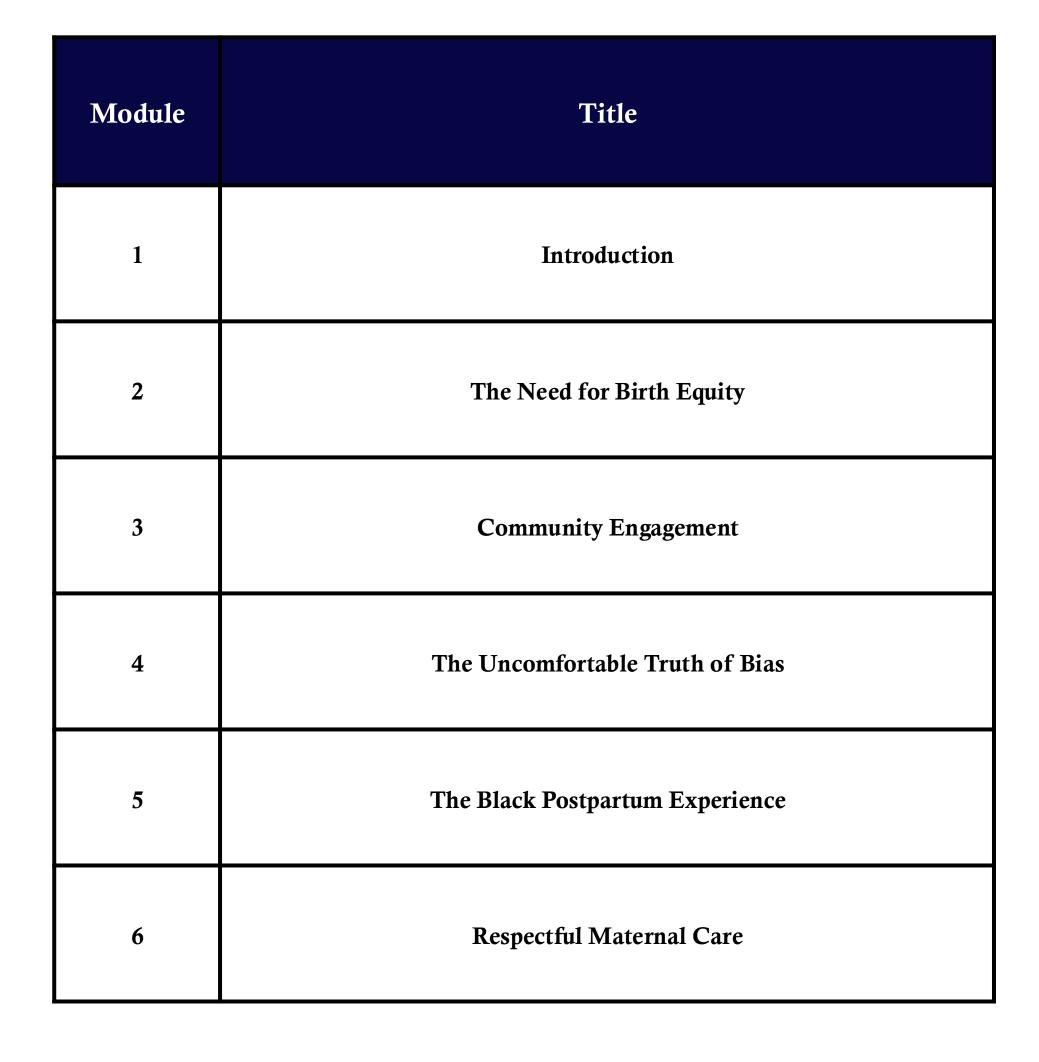
## Knowledge

#### Birth Equity Training

- Developed with KBEN members
- Centers the lived experiences of Black birthing persons and partners, doulas, etc.
- Stop, Look, Listen, & Think Campaign

#### **Kansas Perinatal Quality Collaborative**

- Partnership with KDHE & KPQC
- Provided training to Fourth Trimester Initiative Champions & their colleagues across the state





SCIENTIFIC TERM/OTHER TERMS	MEANING	EQUITABLE CHOICE
Non-compliant	No choice in the care/decision making	Low Patient Activation
Vulnerable/Marginali zed	No Value to society	Low Societal Support
Uneducated/under- educated	De-valued/Lack of knowledge to care for yourself and child	Learning communities
Those people	No value	No replacement
Low-income	Unworthy of equitable care	Underprivilege/Non- privileged individuals
Single-Parents	No fathers/partners	Partnerships/ Parenting Solo
Race		Racism

### BIRTH EQUITY TERMINOLOGY

## Equity in Healthcare

Birth Equity Clinical Scholars Training Program (BEST)

#### Partnership w KUMC OBGYN & Family Medicine Residency Programs

- 2 Year Fellowship Program
  - Educate and empower providers to create and sustain inclusive, accessible, and equitable maternal care, specifically for Black women.
  - Trained in Birth Equity
  - Monthly Didactics in research, policy, community engagement, and coordination of care
  - Service Projects with Community Organizations
    - Shadowing MCHWs & Doulas
    - Service at Uzazi Village
  - Research Project related to birth equity & reproductive justice
  - Policy Engagement







## Advocacy/Power/Equity

#### Policy Partners

- Thrive Allen County
- Kansas Breastfeeding Coalition
- Kansas Birth Justice Society

#### **KS Paid Family Leave**

- Partnership with KS organizations to advance family-centered policies.
- We provide information to guide advocacy efforts.

#### Kansas Momnibus Act

Zero to 3: Built for Babies Convening







FATHERHOOD: PUTTING THE "P" IN MCH- MPCH

BARBERSHOP INITIATIVE: PATERNAL POSTPARTUM HEALTH

BARBERSHOPS

REACHING OVER 110 CLIENTS

#### INCREASED PARTICIPATION IN RESEARCH





Engaging and Building Trust



Research Knowledge and Recruitment



#### WILL INCLUDE:

- Shampoo
- ConditionerBody wash
- Hand soap
- Diapers
- Deodor
- Toilet paper
- Personal care hygiene products





RESOURCE

charge to help you keep your



3035 N 27th St Kansas City, KS 66104



















#### WHAT'S NEXT: Shaping the Future Together

- Statewide Collaboration: Kansas Community Collaborative to Prevent Infant Mortality
  - Centering the Community
    - Listening Sessions
  - Shifting from hierarchical structures (hospital-led) to shared leadership
  - o Championing shared power and mutual respect between:
    - Community Voices
    - Hospital Systems
    - PQCs

#### Our Team

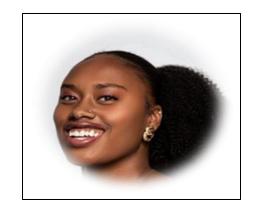




Sharla Smith, PhD, MPH Founder & Director



Oluoma Obi Project Manager



Daijah Jones Research Associate



Claire Metcalf Graduate Research Assistant



Shea Roy Kempsen Graduate Research Associate



Elizabeth Madrigal Research Associate

https://www.kumc.edu/school-of-medicine/academics/departments/population-health/research/kansas-birth-equity-network.html

https://www.k-ben.org/



Sapphire Garcia-Lies Patient Advocate Lead



**Kyle Ellison**Patient Advocate Lead



**Rev. Tony Carter** Community Engagement Manager



Shalese Clay Patient Advocate Lead

# Thank You!









Join KBEN

https://redcap.kumc.edu/s
urveys/?s=C7PAHM8W3P



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# The Community in CCHI

Michelle Edison, MPH, MS
CCHI Project Director,
NICHQ

# Thinking BIG

#### CCHI Vision

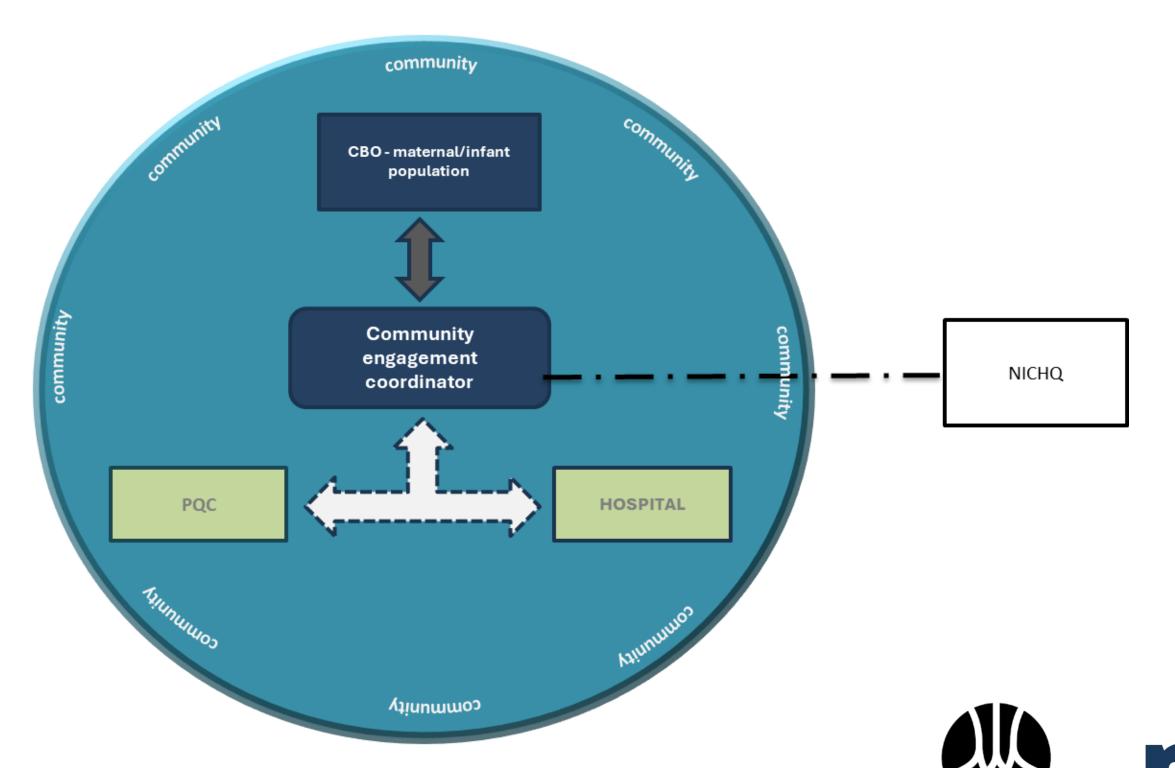


We envision a world where every community, filled with realized power, leads transformative efforts that achieve optimal health for families.





# Framework-Communities Lead Collaborative Efforts



six dimensions

Children's Health Quality







# The Community in CCHI

Monica Stinson, MS, CHES
Program Manager,
MS Perinatal Quality Collaborative



POWER TO THE PEOPLE:

"Centering Families to Transform

Maternal & Infant Health"



Monica Stinson, MS, CHES Sr. Program Manager

# What is a Perinatal Quality Collaborative?

#### **History**



Perinatal Quality Collaboratives (PQCs) are state or multistate networks of teams.



They work to improve the quality of care for mothers and babies.

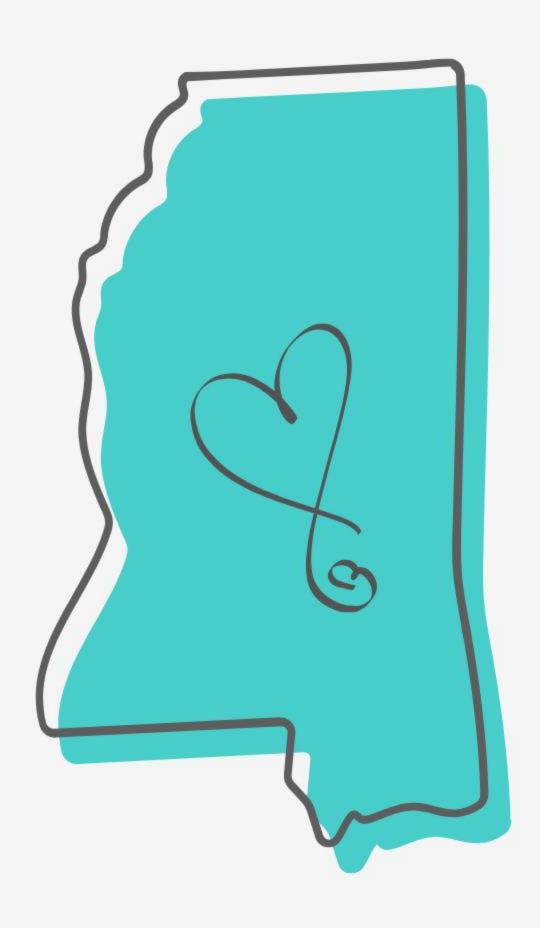


PQCs contribute to important improvements in health care and outcomes for mothers and babies



Most states currently have active collaboratives, and others are in development





#### About the Mississippi Perinatal Quality Collaborative (MSPQC)

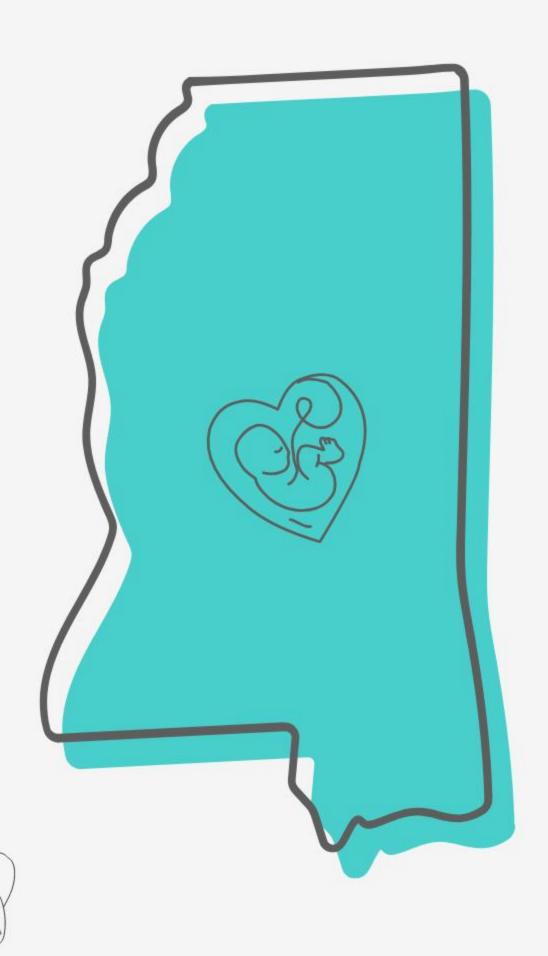
#### The Begining

The MSPQC was started in 2014. The MSPQC serves as a cornerstone of statewide efforts to enhance maternal and infant health across Mississippi, fostering a powerful partnership between clinical teams, public health experts, hospitals, health departments, and families.

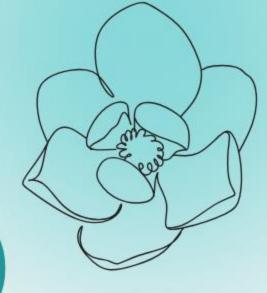
#### Our Collaborative, Evidence-Based Approach:

To ensure comprehensive care, MSPQC's work is structured through three key divisions:

- Maternal Division: Focusing on best practices for mothers.
- Neonatal Division: Dedicated to improving outcomes for newborns.
- Patient & Family Engagement: We believe patient voices are paramount and are central to the care process.



### About the Mississippi Perinatal Quality Collaborative (MSPQC)



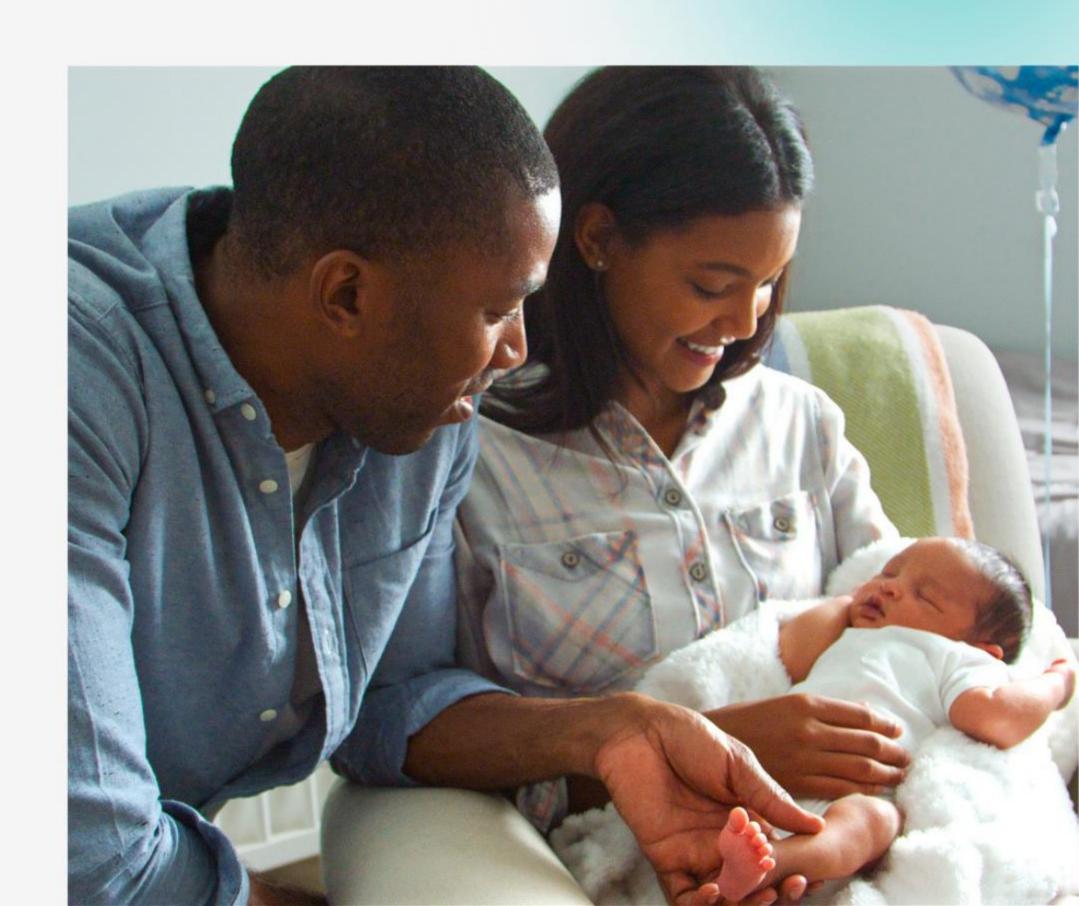
- Our Collaborative, Evidence-Based Approach:
- Statewide initiative housed at Mississippi Public Health Institute (MSPHI)
- Utilizes a data-driven strategy to improve birth outcomes
- Implements quality improvement initiatives at the hospital and community level
- Emphasizes equity, hospital-community engagement, and quality improvement

# Centering Familes for Impact &

Families as key stakeholders in care design Build trust through listening and collaboration

Share power across systems for better outcomes

Call to Action:
Strengthen
clinicalcommunity
linkages



# Collaboration with Six Dimensions

Goal: Bridge clinical care with community outreach and education

- Promote respectful, culturally-responsive care
- Use data and lived experience to inform change
- Storytelling, community engagement, provider education



# The Power 25 of Collaboration

Collaboration drives innovation and collective problem-solving

Brings together diverse expertise from clinical, community, and policy sectors

Strengthens trust and continuity of care for birthing families

Increases sustainability and reach of maternal health interventions

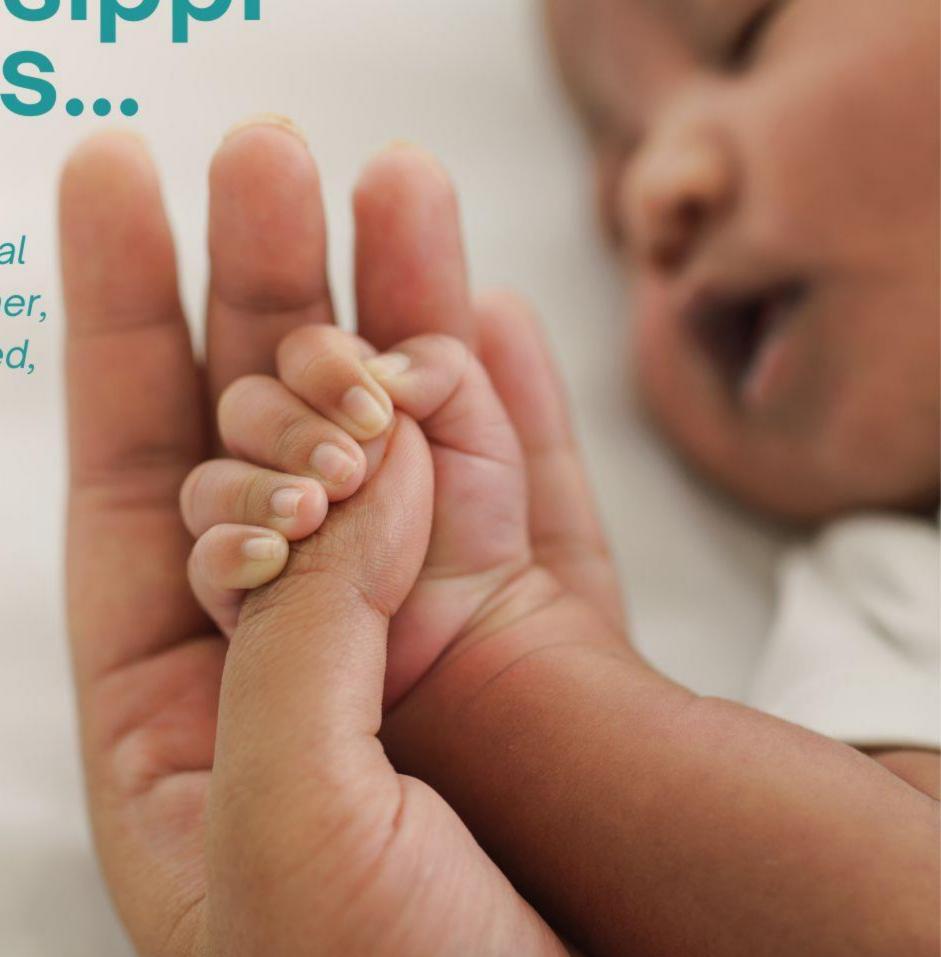
Shared goals, resources, and accountability lead to stronger, more equitable outcomes



Improving Mississippi Birth Outcomes...

The healthiest outcomes happen when clinical expertise meets community wisdom — together, we create care that is not only evidence-based, but human-centered!





# Thank You!

Monica Stinson, MS, CHES
Sr. Program Manager
Mississippi Perinatal Quality Collaborative

Email: mstinson@msphi.org
Website: www.mspqc.org







# Audience Q&A

Shalonda Coleman CCHI Senior Project Manager, NICHQ







# Call to Action: Enhancing Black Maternal Health Outcomes

Nakeitra L. Burse, DrPH, CHES



## Final Remarks & Next Steps

- We'd love your feedback. Please complete the survey!
- Look out for the post-meeting email with slides, recording, and survey.



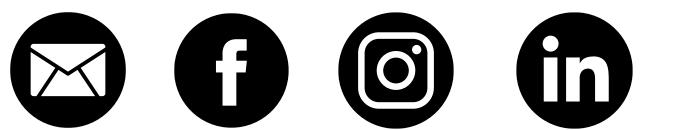
# Thank You

#### **CONNECT WITH US**

















info@sixdims.org @sixdims www.sixdims.org

