Michigan Family Planning Update Conference
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“We can’t solve problems by using the same kind of thinking we used when we created them.”
~Albert Einstein
Population Health Administration
  Sue Moran

Bureau of Family Health Services
  Lynette Biery

  Division of Immunizations
    Bob Swanson

  Women, Infants and Children (WIC) Division
    Stan Bien

  Division of Maternal and Infant Health
    Brenda Fink

  Division of Child and Adolescent Health
    Carrie Tarry
Division of Maternal and Infant Health

- The Division works to improve and ensure women, infants, and families are healthy and thriving before, during, and after pregnancy.

- Key programs and priorities include:
  - Reduce maternal morbidity and mortality
  - Reduce teen pregnancy
  - Ensure planned pregnancy
  - Administration of the Maternal Infant Health Program - Medicaid funded Home Visiting
  - Safe Sleep Programming and Education
  - Early Hearing Testing

- Division touched 600,000 families in 2016, 21 million media images, and 105 unique regional organizations.
MICHIGAN'S Winnable Battles

Following the leadership of the Centers for Disease Control and Prevention’s Winnable Battles to achieve measurable impact quickly, Michigan has identified the population health priorities with the largest-scale impact and known effective strategies to address them.
Infant Mortality Rate: Michigan, 2000-2015
(rate per 1,000 live births)

Data source: Michigan resident live birth files and infant mortality files, Division for Vital Records and Health Statistics, MDHHS
Trend of Infant Mortality by Race/Ethnicity and Black/White Ratio, Michigan, 2005-2015

Data source: Michigan resident live birth files, and infant mortality files, Division for Vital Records and Health Statistics, MDHHS.
Michigan Infant Mortality Reduction Plan

- Implement Regional Perinatal Care System
- Reduce premature births and low birth weight
- Increase infants born healthy and continue to thrive
- Reduce sleep related infant deaths and disparities
- Expand Home Visiting to promote healthy women and children
- Promote behavioral health services
Michigan Infant Mortality Reduction Plan

- Support better health status for women and girls
- Reduce unintended pregnancies
- Achieve health equity and eliminate racial and ethnic disparities by addressing social determinates of health
Infant Mortality Reduction Support Structure

Infant Mortality Advisory Council

- Communication Plan
- Communities of Practice
- Quality Improvement Learning Collaborative(s)

Infant Mortality Executive Committee

Infant Mortality Project Management Team

Infant Mortality Data and Evaluation Team

GOALS — Infant Mortality Reduction — GOALS

1. Achieve Health Equity
2. Implement Perinatal Care System
3. Reduce Premature Births
4. Increase Healthy and Thriving Infants
5. Promote Infant Safe Sleep
6. Expand Homevisiting
7. Improve Health Status of Women and Girls
8. Promote Behavioral Health Services
9. Reduce Unintended Pregnancy

Each dotted box represents an infant mortality Goal. Each goal has multiple key strategies. Activities and programs are in place across the state that link to the key strategies.
Michigan’s Family Planning Programs: Key Partners

Family Planning is a key contributor to Michigan’s Infant Mortality Reduction Plan:

- Access to family planning helps couples have healthier pregnancies, time and space births, and to achieve desired family size
  - Positive impact on maternal health
  - Decrease risk of prematurity and low birth weight
  - Reduces pregnancy related mobility and mortality
Positive impact on women’s social and economic advancement

- Education and workforce participation
- Higher incomes
- Family stability
- Mental health and happiness
- Children’s well being

Provides gateway to primary care, behavioral health and other social and medical needs - you may be the only provider that client sees all year!
Michigan’s Family Planning Programs: Key Partners

- Served 66,189 women and men
- 20% of clients were teens
- 9% were males - Represents an 80% increase from 2015 to 2016!
- 60% living at or below 100% of the federal poverty level
- 84% of women aged 15-44 years reported using a most effective or moderately effective method of contraception
- 12% of women reported using a long-acting reversible method of contraception - up from 9% in 2015!
Thank you!

» Questions?
» Comments!