

Maternal and Child Health COVID-19 National Partners Convening April 26, 2021 Meeting Summary

Meeting Overview

On April 26, 2021, the Association of State and Territorial Health Officials (ASTHO), in partnership with HRSA's Maternal and Child Health Bureau (MCHB), hosted the *Maternal and Child Health COVID-19 National Partners Convening*. Sixty-five representatives¹ from states, national organizations, and federal agencies convened² to share current activities, anticipated challenges, and opportunities for collaborative problem solving related to the COVID-19 vaccine rollout and uptake in maternal and child health populations. After welcoming remarks from ASTHO and MCHB leadership, CDC staff presented on the impact of COVID-19 during pregnancy, in pediatric populations, and on children with special healthcare needs. During the second half of the meeting, attendees participated in topical discussion groups, including those focused on adolescent and school-aged children, children with special health care needs (CSHCN), pregnant individuals, and policymakers. The discussion groups provided attendees with the opportunity to discuss existing and anticipated challenges and identify areas for support and collaboration. Discussion group key themes and areas for national and federal partner support are captured below.

Discussion Group Themes

Policymakers

Equitable Access

A key theme shared across all groups was ensuring equitable access to COVID-19 vaccines, especially for underserved and under-resourced populations. Participants cited the importance of building relationships with community partners to assist with these efforts. Participants noted that elevating community voices and resources is an effective method to address vaccine hesitancy and should be included in public health messaging and outreach. Other strategies participants identified to address vaccine hesitancy include engaging trusted community messengers, peers, advocates, and healthcare providers; disseminating culturally appropriate communication and outreach; and addressing parental hesitancy with vaccine rollout to adolescents.

Vaccine Outreach and Uptake

Vaccine outreach should leverage multiple access points, including routine check-ups, well-child visits, schools, social services, and home visiting, to increase uptake. Outreach efforts should also address structural barriers to access, including lack of transportation, childcare, stable internet access, and computer literacy. For pregnant individuals, participants noted that the inconvenience of having to attend multiple medical appointments was also a barrier.

¹ See Appendix A for the list of participating organizations.

² See Appendix B for the meeting agenda.

Data Systems and Surveillance

Across group discussions, participants cited enhanced data and surveillance on vaccine uptake and distribution as a necessary component of the COVID-19 response, as data can inform where additional outreach is needed.

Sustainability of Resources

Sustainability of resources is a key component to vaccine distribution. Supporting the maternal and child health workforce throughout the duration of the pandemic response, including paraprofessionals (e.g., doulas and community health workers), is necessary for a robust response and reaching underserved, rural, and vulnerable populations. In addition, sustaining funding to support response efforts and COVID-19 related programming, primarily federal funding, will be crucial during vaccine rollout to additional populations.

Sustaining Public Health Programming

With resources and funding diverted to the COVID-19 response, several public health services and programming have been sidelined, resulting in disruptions in care. The healthcare system should prioritize and prepare for resuming the regular provision of services.

Adolescent and School-Aged Children

School Reopening

Uncertainty remains for school reopenings, including mask requirements, [cohorting](#) structures, and allowance of school activities. Additionally, depending on vaccine mandates for school attendance, attendees raised concerns regarding the timeline between vaccine availability, full inoculation, and subsequent delays in going back to school. Participants noted that middle schools will face more complications, since they have both vaccine-eligible (12+) and vaccine-ineligible students.

Vaccine Distribution

Vaccine distribution requires a multifaceted approach, involving both schools and primary care providers (PCPs), specifically pediatricians. Schools serve as an important access point and can be used to host school-based campaigns (which may be particularly important in rural locations), or to help identify vulnerable children and families. PCPs will also play an important role in vaccine distribution. The COVID-19 pandemic has resulted in missed well-child visits and routine immunizations and has impacted the mental well-being of children and adolescents. Vaccine appointments can be leveraged as an opportunity for PCPs to assess a patient's health.

Children with Special Health Care Needs

Clear Messaging

Engaging appropriate provider specialists as trusted messengers will be key to alleviating vaccine hesitancy, primarily among parents and/or caretakers of children with special health care needs. Additionally, outreach efforts should utilize advocacy organizations that have regular communication with these children and their families, including Medicaid case managers, special education programs, home visiting programs, and local organizations.

Vaccine Distribution

States should leverage several access points to promote vaccine uptake, including schools, provider specialists, and home visiting programs. Home visiting is critical in this effort and can be used to vaccinate not only children but all individuals in the home.

Pregnant Individuals

Clear Guidance

Participants noted that clear guidance on vaccine recommendations for pregnant people is needed to address confusion among this population and providers. Unclear messaging (e.g., “pregnant people can get the vaccine” vs. “pregnant people should get the vaccine”) and persistent misinformation have impacted access; pregnant people have been denied vaccine at pharmacies or been required to bring physician notes to receive vaccines. Attendees noted that clear recommendations for this population would assist with outreach. Other strategies include clarifying any misinformation for this population and ensuring that pregnant people who want the vaccine do not face barriers to access.

Leveraging Stakeholders

Leveraging existing access points, including OB-GYNs, WIC and social services programs, and schools, can support increased vaccine uptake.

Areas for National and Federal Partners to Support States and Jurisdictions

During the meeting, participants noted that national and federal partners can support states and jurisdiction’s COVID-19 vaccine rollout for the maternal and child health population by:

Guidance and Messaging

- Assisting with developing clear, concise, and specific messaging for different maternal and child health populations.
- Leveraging trusted messengers, including peers, advocates, and healthcare professionals, for outreach and to address vaccine hesitancy.
- Strengthening existing clinical guidance to minimize confusion, specifically for pregnant individuals.
- Ensuring that school districts have appropriate guidance and support of public health and healthcare providers during reopening, including support for school-based testing and vaccination delivery.

Stakeholder Engagement

- Ensuring that appropriate stakeholders, including community leaders and members, are involved in all phases of vaccine messaging and distribution.
- Facilitating routine communication among national organizations, federal partners, and states to share updates and identify areas for collaboration and support on COVID-19 vaccine distribution and uptake and other related activities.
- Facilitating connections between public health and education sectors to support planning for school reopening and vaccine rollout to adolescents.

Provider Training and Support

- Ensuring providers (e.g., primary care providers, pediatricians, and OB-GYNs) are prepared to vaccinate maternal and child health populations by providing logistical support and technical assistance, as needed.
- Providing guidance and support to providers on how to engage families, specifically related to keeping up with well-child visits and routine vaccinations.
- Leveraging paraprofessionals, including community health workers and nurse home visitors, to encourage vaccine uptake.

Health Equity

- Increasing access to COVID-19 vaccines in underserved and rural areas through culturally appropriate communication and outreach.
- Assisting in leveraging existing systems, including home visiting programs, as access points and opportunities for outreach.
- Addressing structural barriers to access, including lack of transportation, childcare, stable internet access, and computer literacy.
Elevating community voices in public health messaging and outreach, engage trusted community messengers, peers, advocates, and health care providers.

Appendix A: List of Participating Organizations

State Representatives

- Alaska
- Florida
- New Mexico
- Tennessee
- Texas
- Vermont

National Organizations

- American Academy of Pediatrics
- American College of Obstetricians and Gynecologists
- Association of Immunization Managers
- Association of Maternal and Child Health Programs
- Association of State and Territorial Health Officials
- Association of State and Tribal Home Visiting Initiatives
- Association of University Centers on Disabilities
- Columbus Public Health
- MITRE
- National Academy for State Health Policy
- National Association of Pediatric Nurse Practitioners
- National Governors Association
- National Healthy Start Association
- National Conference of State Legislatures
- Society for Maternal Fetal Medicine

U.S. Department of Health and Human Services Divisions

- Administration for Community Living
- Administration for Children and Families
- Centers for Disease Control and Prevention
- Health Resources and Services Administration
- Indian Health Service

Appendix B: Maternal and Child Health COVID-19 National Partners Convening Agenda

Goal: Identify the unique needs of maternal and child health (MCH) populations and necessary response efforts in the context of the COVID-19 pandemic.

Desired Meeting Outcomes:

- **Discuss** national organizations’ and state representatives’ understanding of current needs for MCH populations at the state, local, and family levels, in preparation for vaccine availability, and share current and future activities to support MCH populations in COVID-19 vaccination, testing, contact tracing, and activities to reduce the spread.
- **Identify** areas of coordination and where MCHB and partners can collaborate to support states’ COVID-19 activities for MCH populations, especially vulnerable populations, and children with special health care needs.
- **Identify** a group of national partners that will be ready to mobilize and collaborate around these activities for MCH populations, as well as continue to share best practices.

Monday, April 26, 2021

1:00pm – 4:00pm ET

12:55pm - 1:00pm	<p>Meeting Login Please log in to Zoom using the link provided. The meeting will begin promptly at 1:00pm ET.</p>
1:00pm	<p>Welcome ASTHO will welcome participants, review the agenda, and discuss the meeting objectives and goals.</p> <ul style="list-style-type: none"> • Jim Blumenstock, Senior Vice President, Pandemic Response and Recovery • Ellen Pliska, Senior Director, Family and Child Health, ASTHO • Sanaa Akbarali, Director, Family and Child Health, ASTHO
1:10pm	<p>Opening Remarks from MCHB Leadership Dr. Michael Warren will provide opening remarks on behalf of HRSA’s Maternal and Child Health Bureau.</p> <p>Speaker:</p> <ul style="list-style-type: none"> • Michael Warren, MD, MPH, FAAP, Associate Administrator, Maternal and Child Health Bureau, HRSA
1:20pm	<p>CDC Updates CDC will provide updates on COVID-19 work related to the maternal and child health populations.</p>

	<ul style="list-style-type: none"> • Titilope Oduyebo, MD, MPH, CPH, Medical Officer, V-safe Pregnancy Registry Team, Vaccine Task Force Maternal Immunization Team, Vaccine Task Force Pregnancy and Infant Linked Outcomes Team, Epidemiology Studies Task Force, COVID-19 Response, CDC • Karen Remley, MD, MBA, MPH, FAAP, Director, National Center on Birth Defects and Developmental Disabilities, CDC
1:55pm	Wellness Break & Session Transition
2:00pm	<p>Overview of Participants' Activities ASTHO will provide a summary of the findings from the pre-meeting activity including current and future activities, and anticipated challenges related to COVID-19 and MCH populations.</p> <p>Speakers:</p> <ul style="list-style-type: none"> • Sanaa Akbarali, MPH, Director, Family and Child Health, ASTHO • Anna Schwartz, MPH, Analyst, Family and Child Health, ASTHO
2:10pm	<p style="text-align: center;">Discussion Group Session #1</p> <p><i>In breakout groups, participants will engage in a facilitated discussion on COVID-19 vaccination, testing, contact tracing, and reducing the spread. Participants will identify opportunities for collaboration and support from federal partners.</i></p> <p>Discussion Groups</p> <ul style="list-style-type: none"> • Adolescent and School-Aged Children • Children with Special Health Care Needs • Pregnant Women • Policy
2:45pm	<p style="text-align: center;">Discussion Group Session #1 Debrief</p> <p><i>Participants will rejoin the larger group to share key themes from the breakout group discussions.</i></p> <p>Facilitators:</p> <ul style="list-style-type: none"> • Ellen Pliska, MPH, CPH, Senior Director, Family and Child Health, ASTHO • Sanaa Akbarali, MPH, Director, Family and Child Health, ASTHO
2:55pm	Wellness Break & Session Transition
3:05pm	<p style="text-align: center;">Discussion Group Session #2</p> <p><i>In breakout groups, participants will engage in a facilitated discussion on COVID-19 vaccination, testing, contact tracing, and reducing the spread.</i></p>

	<p>Participants will identify opportunities for collaboration and support from federal partners.</p> <p>Discussion Groups</p> <ul style="list-style-type: none"> • Adolescent and School-Aged Children • Children with Special Health Care Needs • Pregnant Women • Policy
3:40pm	<p style="text-align: center;">Discussion Group Session #2 Debrief</p> <p>Participants will rejoin the larger group to share key themes from the breakout group discussions.</p> <p>Facilitators:</p> <ul style="list-style-type: none"> • Ellen Pliska, MPH, CPH, Senior Director, Family and Child Health, ASTHO • Sanaa Akbarali, MPH, Director, Family and Child Health, ASTHO
3:50pm	<p>Final Remarks</p> <p>ASTHO and MCHB will provide final remarks and identify next steps.</p> <p>Speakers:</p> <ul style="list-style-type: none"> • Michael Warren, MD, MPH, FAAP, Associate Administrator, Maternal and Child Health Bureau, HRSA • Ellen Pliska, MPH, CPH, Senior Director, Family and Child Health, ASTHO
4:00pm	<p>Adjourn</p>