



Jane

Jane is the MCH Director at a local health department in a large urban-rural mixed county. She has had the opportunity to attend several MCH conferences and meetings over the past year where she has heard interesting presentations and attended inspiring workshops on the Life Course Perspective. She wasn't able to attend the MCHB 75th Anniversary event, but she has read the Life Course Concept Paper and has had a chance to play the CityMatCH Life Course Game at a recent CityMatCH meeting.

For many years, the health department where Jane works has been puzzling over the growing gap in birth outcomes between their African American, Latino, and Caucasian populations. The county does an outstanding job of getting women of all ethnicities into prenatal care within the first three months of pregnancy, however despite this high success rate of early entry into care, birth outcomes for African American and now Latino babies are poor and continue to decline (high rates of low-birth weight babies, increased number of preterm births for these populations, and infant mortality rates that have not shown a decline in over 10 years).

The Life Course Perspective makes sense to Jane – the idea that a combination of social, biological, psychological, behavioral, economic, and environmental risk and protective factors contribute to health across a person's

life. She would like to introduce this perspective to the Health Department leadership and her MCH staff teams, but she anticipates a lot of resistance. Her staff are busy and don't have the mental energy to learn "one more new thing that *might* make a difference" after years of working to generate excitement and engagement in prenatal care visits. The Public Health Nursing staff are strong supporters of clinical care and intervention and do not want to "get sidetracked by social issues that everyone knows are part of the problem but not *the* problem." Local community based organizations that have been talking about how these social determinants of health affect health outcomes for several years would like to see a broad-based collaborative strategy launched, but are worried that the health department will "just want to take over and not build a partnership in a meaningful way."

Jane really wants to succeed with this new approach and begins to outline a strategy by thinking through the following questions:

1. Who are the stakeholders that should be engaged to begin to move forward with the introduction of Life Course concepts to staff in her program and to other managers at the county health department?
2. Are there 2-3 other staff or managers who Jane can engage in this effort who she knows will be supportive and interested

in seeing how the Life Course Perspective can be integrated into the work they are doing?

3. What approaches for introducing something "new" have worked before? How can Jane adapt those steps to her desire to move ahead with this new effort?
4. Given that Jane anticipates certain resistance on the part of her MCH staff and others, what are some benefits that staff could receive from exposure to the Life Course Perspective and possible educational opportunities?
5. How have other MCH Directors in other settings approached introducing and integrating Life Course into their departments? What tools exist that could be useful to Jane as she begins to strategize with others in her county health department for bringing other staff and managers along?
6. What kind of regular check-in or evaluation can Jane set up to do with staff and other health department managers to assess how things are going and to gain insights into what is working or not working?
7. What are the most effective and strategic steps for getting everyone engaged and excited?