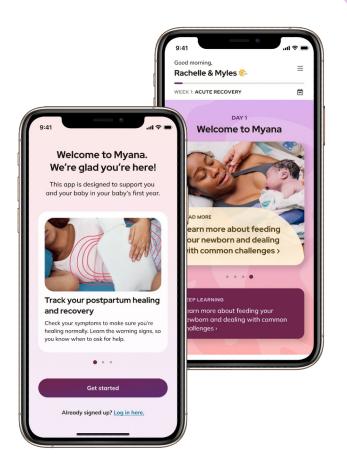


Digital health tools to address maternal and child health equity needs in PA

Tamar Krishnamurti, PhD

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The problem

- US severe maternal morbidity and mortality rates are high
- Many preventable deaths occur after hospital discharge
- Disparities in outcomes (and care) for Black and Brown birth-giving individuals and their infants are abysmal

"delays in diagnosis and effective treatment" "patients' knowledge of warning signs" "not recognizing when to seek care" "limited time with healthcare providers"

• Better information, increased touchpoints, earlier risk prediction, and stronger connection to resources can benefit maternal (and infant) health

myana^{*}²



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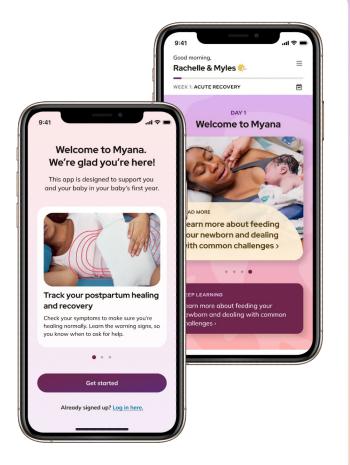
- Grounded in evidence-based science
- Incorporates community stakeholders as partners in the design, development, and deployment
- Supports patient autonomy in managing their care
- Advances health equity



Pitt and Commonwealth of PA

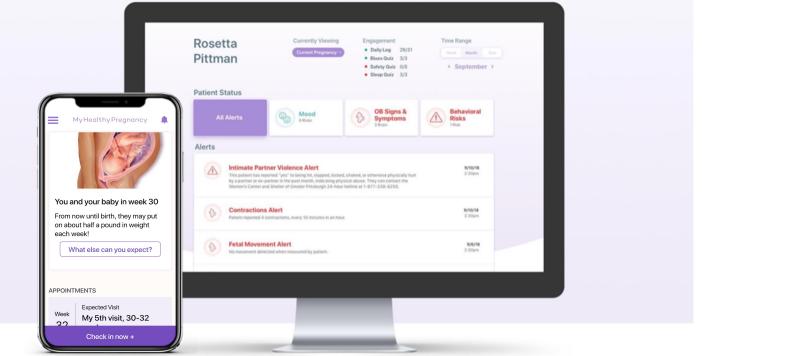
PA legislature approached University of Pittsburgh's Health Policy Institute about funding the development of an educational tool to supplement home visiting

- U of Pitt team (us!) already developing a postpartum support tool
- The State Legislative Initiative Grant supported further development of Myana
 - \$1 million over a 12 month period ending in September 2024.



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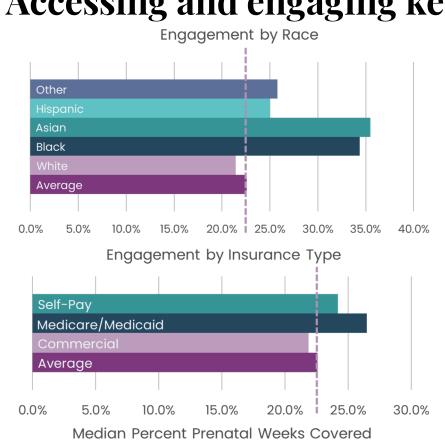
MyHealthyPregnancydigital platform



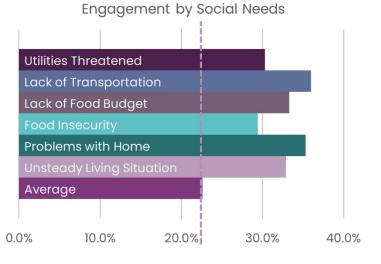
Made by PA moms, with PA moms, for PA moms

• My Healthy Pregnancy





Accessing and engaging key groups

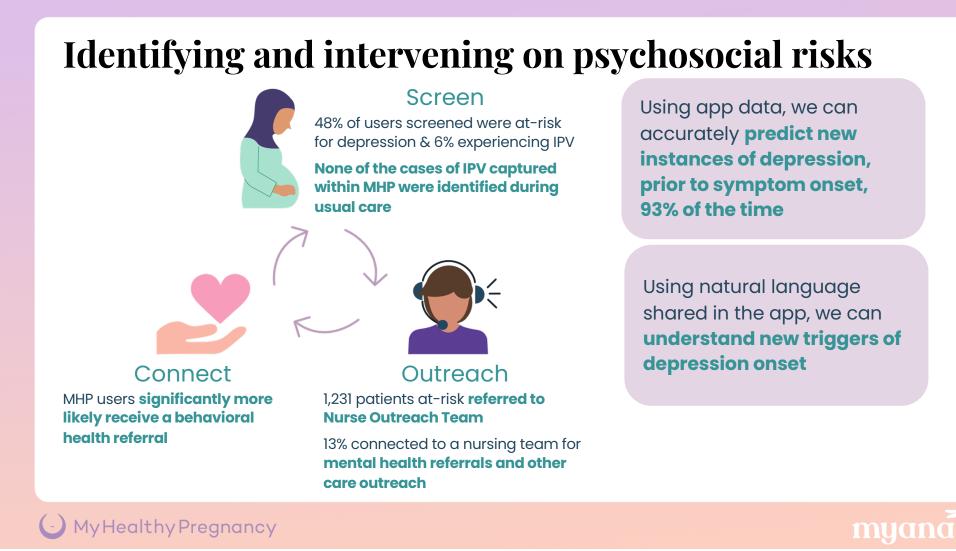


MHP use is associated with a significant increase in prenatal visits attended and fewer cancellations

MyHealthyPregnancy

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Identifying and intervening on clinical risks

Using in-app data, we accurately predict preeclampsia **70% of the time**

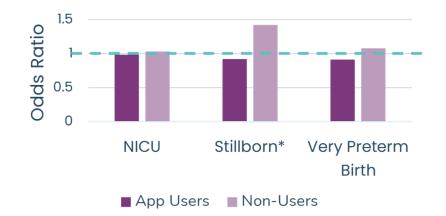
27% of high-risk patients had **no documented prophylactic aspirin prescription**

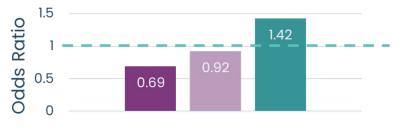
Among those with a documented aspirin prescription, **37% were unaware of it**

Best practice alert implemented for UPMC providers



Improving outcomes





Stillborn*

- Kick Counter Effect Onboarding Effect
- Prescription Effect

Increased weeks of use of MHP during the first 20 weeks of pregnancy **increased the number of gestational weeks** (C = 0.16, p < 0.001, CI = [0.09, 0.22])

Using the Kick Counter within MHP reduces the odds of stillbirth by 31%

*Detecting statistically significant differences is not possible due to the low overall event rate. Trends show clinical relevance

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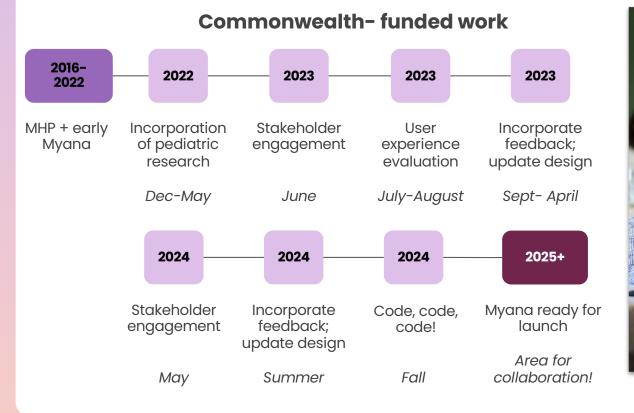
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Myana overview





Iterative, person-centered design and evaluation





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Postpartum journey overview

Week 1	Acute recovery	Baby's first few days
Week 2	Getting comfortable	Feeding your baby
Week 3	Mental health	Bonding with baby
Week 4	Sleep & self- care	Baby sleep
Week 5	Continued healing	Soothing strategies
Week 6	Halfway through the 4th trimester	Rapid growth and change
Week 7	Adjusting to your new normal	Tummy time
Week 8	Health maintenance	Vaccinations: what you need to know

Week 9	Family finances	Uncertainty in parenting
Week 10	Your mental health matters	Emotional development
Week 11	More healing	When to call the doctor
Week 12	Navigating social media	Supporting milestone development
Week 13	Living well	Creating routines
Week 14	Safety in the home	It's okay to ask questions
Week 15	Resource connection	Safety outside the home
Week 16	Health maintenance	Sleeping through the night

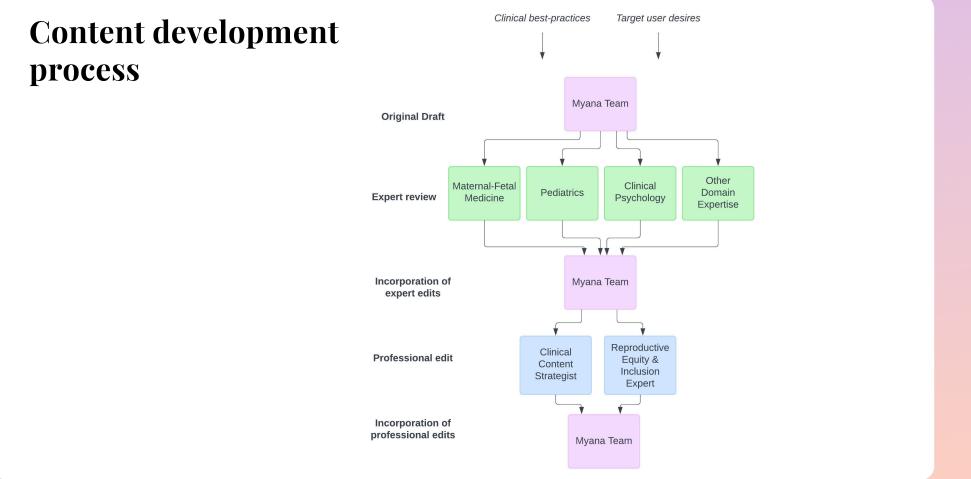
Month 5	Trying new things	
Month 6	Responding to needs	
Month 7	Exploring temperament	
Month 8	Modeling distress tolerance	
Month 9	Expanding worlds	
Month 10	Creating safe spaces	
Month 11	Setting limits	
Month 12	New ways of communicating	

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Functionality

	Birth parent	Baby
Symptom triaging	 acute postpartum risk factors 	
Assessment/screening	 depression intimate partner violence social factors with health impacts 	developmental milestones
Education	 what to expect when becoming a parent postpartum recovery positive parenting building a family care team 	 newborn feeding signs of illness and when to seek care immunizations and screening healthy growth and development
Resource connection	 mental health substance use support groups health-related social needs 	 early intervention lactation safety childcare

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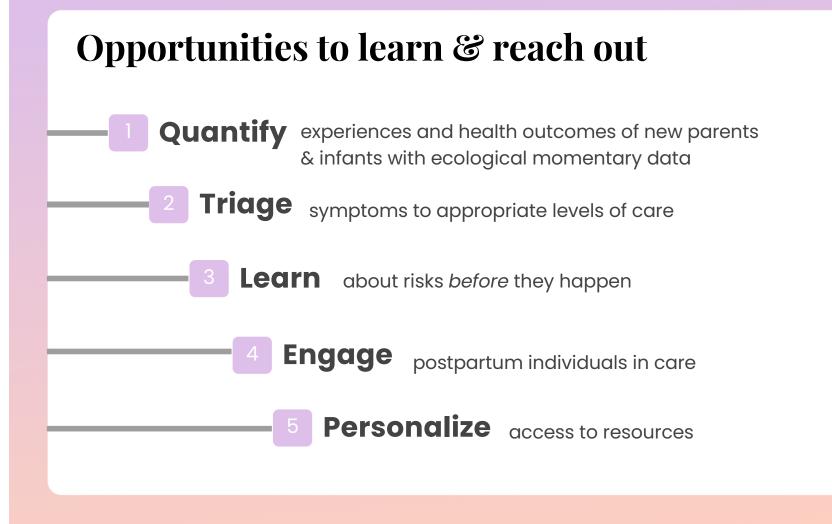
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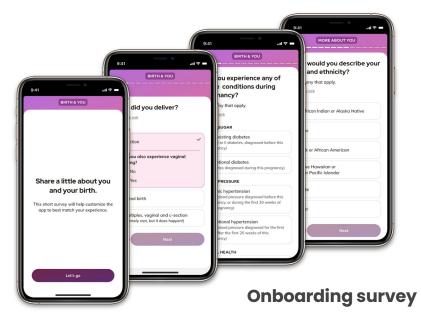


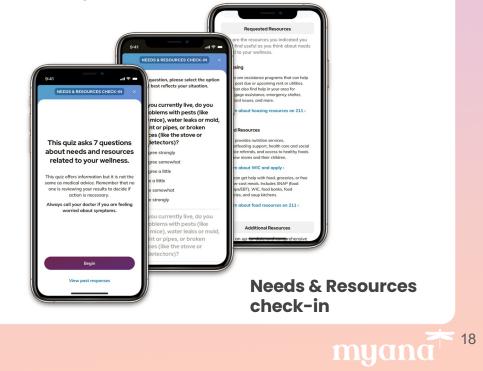


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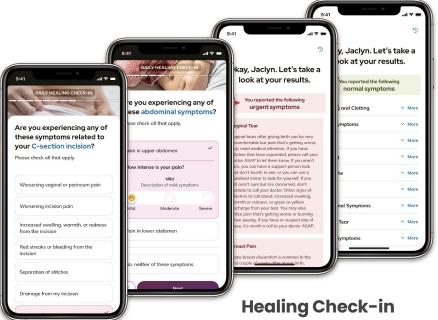
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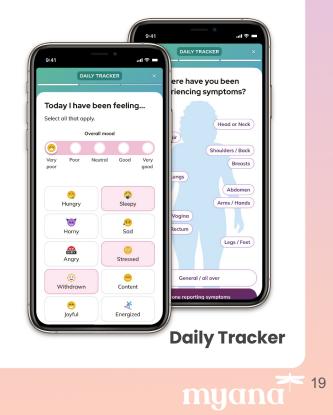
Quantify experiences and health outcomes of new parents and infants with ecological momentary data





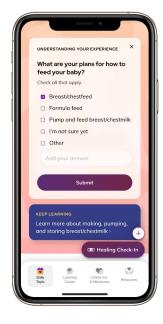
Triage symptoms to appropriate levels of care





Learn

about risks *before* they happen



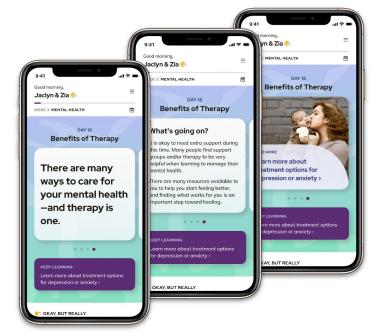
Interpretable machine learning methods can predict risk and suggest precision interventions

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Engage Po

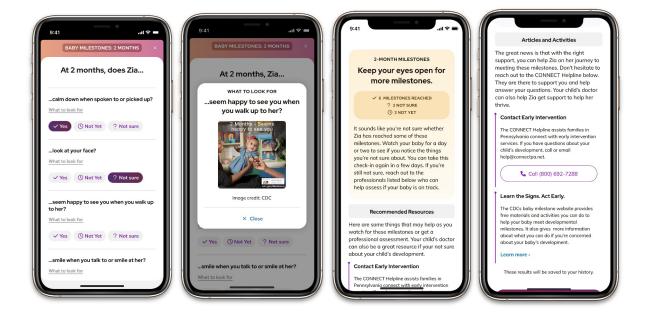
Postpartum individuals in care



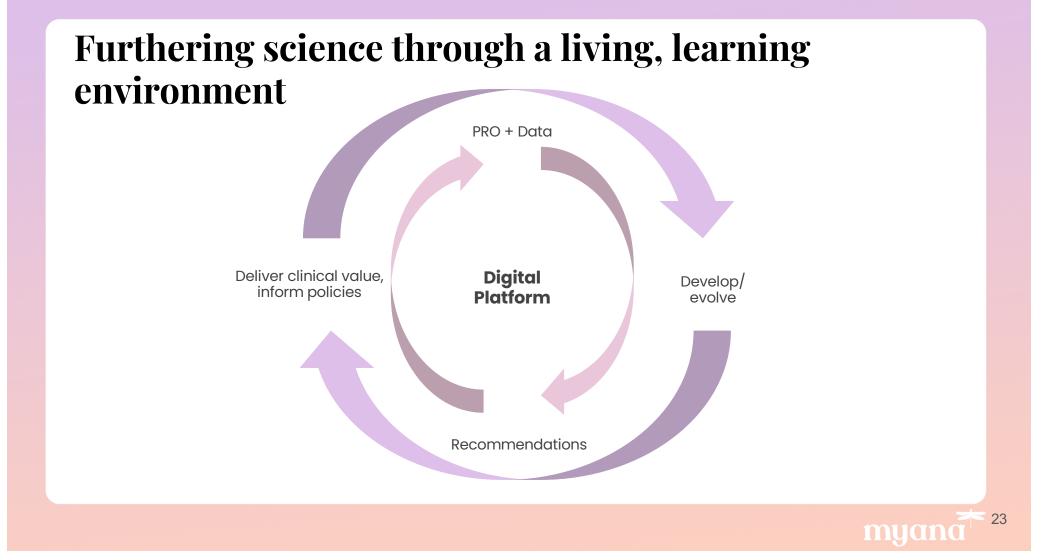


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Personalize access to resources based on need and location



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Next steps

Statewide implementation grounded in RE-AIM framework and operating through a health equity implementation framework lens

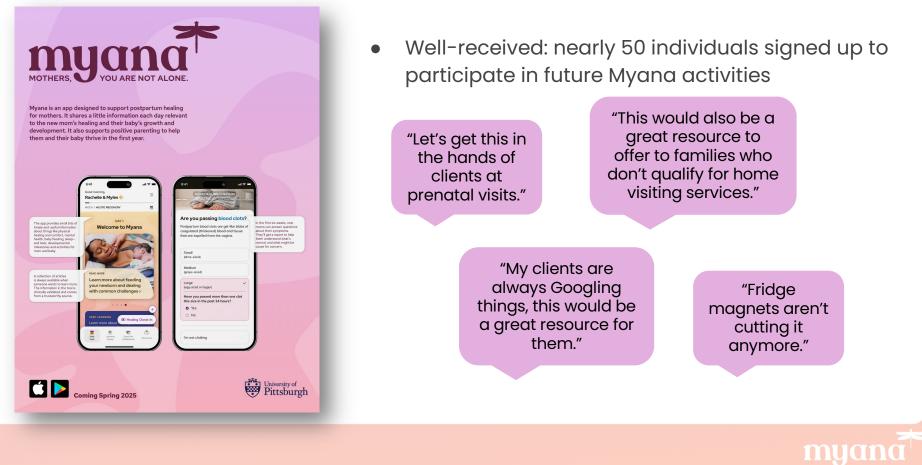


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- Brainstorming sessions with 'Implementation Facilitators' representing different state organizations Community engagement studios with maternal health-based community organizations and Perinatal Individuals from diverse communities across the state.
- Evaluation of use and outcomes



Myana at OCDEL Home Visiting Conference



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We welcome feedback and collaboration

- Who should be at the table?
- What organizations or individuals may be Implementation Facilitators
- Other feedback?



Link to Survey



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