



Centering Health and Racial Equity in Emergency Preparedness and Response Capacity Building for the Maternal and Child Health (MCH) Workforce

Request for Application

Deadline to Apply: February 28, 2022, by 11:59 pm EST

The Association of Maternal and Child Health Programs (AMCHP) is currently accepting applications for a health and racial equity consultant. See below for:

- RFA Summary
- Project Background & Overview
- Consultant Expectations
- Application Form

RFA SUMMARY

The Workforce Development and Capacity Building Team at AMCHP is requesting applications for a consultant and subject matter expert on health and racial equity to support our emergency preparedness and response (EPR) capacity building initiatives for the MCH workforce. The contracted consultant will audit the Public Health Emergency Preparedness and Response (PHEP) Checklist for Maternal and Infant Health and provide recommendations for changes and additions that are poised to guide more equitable practices and, ultimately, population-level outcomes. The resulting product will further inform an accredited e-learning course for relevant professionals and other project deliverables. The equity consultant will work closely with the Program Manager, Emergency Preparedness and Response and other key staff.

What are we looking for in an equity consultant?

- ✓ Interest in improving support and outcomes for Black, Latine, Asian, Indigenous, Pacific Islander, and other communities of color.
- ✓ Interest in improving support and outcomes for women of reproductive age, pregnant and postpartum women, newborns, and infants in preparing for and responding to all types of intersecting emergencies.
- ✓ Experience in building the overall capacity of public health systems and professionals.
- ✓ Interest in systemically prioritizing health and racial equity at a state/territory level to improve policies and programs to meet the unique needs of MCH communities before, during and after emergencies.

Timeline and Details

Request for Applications Released: February 7, 2022

Applications Due: February 28, 2022

Selection Announcement: March 7, 2022

Project Period: March 2022 – July 2022

Point of Contact: Nia Sutton (nsutton@amchp.org)

Emergency Preparedness in MCH

Climate change and natural disasters, the ongoing COVID-19 pandemic, and increased consciousness of domestic and foreign terrorism – including exposure to chronic violence – have heightened awareness of the need for emergency preparedness and response (EPR) within the larger maternal and child health (MCH) community. In response, the Association of Maternal and Child Health Programs (AMCHP) leads and supports programs and professionals to meet the needs of diverse MCH communities. AMCHP aims to increase each jurisdiction's capacity to engage in disaster and emergency preparedness to meet the needs of MCH populations. Our role is to ensure MCH populations' needs are represented in discussions about and recommendations relevant to emergency preparedness at the national, state, and territorial levels.

PROJECT BACKGROUND

AMCHP focuses on building the EPR capacity of state and territory MCH directors, health care providers, and other relevant stakeholders. Our federally funded programs, technical assistance, and resource sharing support the MCH workforce in partnering and coordinating with state/territory public health emergency preparedness and response (PHEP) programs to ensure that the MCH populations they support are considered and prioritized during emergencies. The populations include pregnant and postpartum women, women of reproductive age, newborns, and infants.

Project Overview—*The Big Picture*

Funded by a five-year Cooperative Agreement with the CDC Division of Reproductive Health, AMCHP leads the Emergency Preparedness and Response Action Learning Collaborative (EPR ALC). The ALC is designed to build EPR capacity for jurisdictional MCH programs by stimulating collaboration and providing participants with resources to build capacity. AMCHP's EPR ALC and many of our other initiatives are guided by the Public Health Emergency Preparedness and Response Checklist for Maternal and Infant Health, a tool adapted from the PHEP Capabilities to address the unique needs of maternal and infant populations. The Checklist was developed by AMCHP with support from the CDC's Division of Reproductive Health and is intended to assess and build EPR capacity of all jurisdictions to ensure that women of reproductive age – especially pregnant and postpartum women and infants – are planned for in the event of emergencies, including multiple emergencies with intersecting impacts.

CONSULTANT EXPECTATIONS

- Perform a health and racial equity audit of the *PHEP Checklist for Maternal and Infant Health*
 - Present findings (strengths, areas for improvement, etc.) to AMCHP staff and partners
- Collaborate with AMCHP staff and partners to publish a more explicitly equity-centered checklist, including but not limited to:
 - Revised strategy, objective, and activity language
 - Revised activity implementation guidance
 - Resources and tools to support activity implementation
- Provide subject matter expertise and equity focused consultation for additional deliverables including:
 - A self-guided, online course aimed at building the capacity of state/territory level MCH and PHEP professionals
 - A comprehensive launch plan for Cohort 4 (Year 5) of the Emergency Preparedness and Response Action Learning Collaborative
 - Sustainable mechanisms for collecting and responding in real time to EPR-focused technical assistance and support requests from AMCHP members

Commitment—*What to Expect*

1. **Bi-weekly conference calls or video meetings with AMCHP team**— 30 minutes each
2. **Monthly video meetings with CDC- Division of Reproductive Health**— 30 minutes each
3. **Time commitment**— 3 -5 hours/week for 16 weeks
4. **Compensation/Budget** -This project has a funding ceiling of \$10,000. The proposal should outline a payment schedule that aligns with deliverable completion and applicant payment schedule preferences.

Application Instructions

To apply for this consultant opportunity, please see the document below and submit all requested items. For all questions related to the submission process, please contact Nia Sutton (nsutton@amchp.org).

Centering Health and Racial Equity in Emergency Preparedness and Response Capacity Building for the MCH Workforce

APPLICATION FORM

Name and pronouns	
Address	
Organizational Affiliation	
Title/Role	
Phone	
Email	
Racial/Ethnic Identity	

To complete this application, please submit the following items to [Nia Sutton \(nsutton@amchp.org\)](mailto:nsutton@amchp.org)
by February 28, 2022, by 11:59 pm ET:

- Above contact information
- Responses to the below prompts (1-2 pages max)
- Resume/CV
- Detailed proposal budget outlining payment schedule that aligns with deliverable completion

1. Define how you understand the concepts of health and racial equity.
2. Describe your personal and professional experiences with advancing or prioritizing health and racial equity in your work. How has your work or the work of teams you've been a part of influenced an agency's programs, policies, and services? Provide any relevant organizational policies, plans, programs, or publications as attachments to this application.
3. Describe your experience with capacity building and workforce and professional development. How did you prioritize health and racial equity as critical components in capacity building and development? Provide an example of how public health systems, like Maternal and Child Health programs, can build capacity for health and racial equity in their work.
4. Describe your understanding of why Emergency Preparedness and Response capacity building is necessary for MCH professionals and programs. Provide an example of how health and racial inequities can impact communities of color and other oppressed communities that are part of the larger MCH population during public health emergencies. Name one strategy or activity that MCH systems could implement to address these inequities.

AMCHP reserves the right to request informal, 30-minute interviews with applicants being strongly considered.