



# AMCHP FUTURE 2027



# AMCHP

ASSOCIATION OF MATERNAL & CHILD HEALTH PROGRAMS

## Our Mission

—————> AMCHP's mission is to advance the health of women, children, youth, families, and communities by strengthening governmental public health and deepening community partnerships through a health equity lens.

## Our Vision

—————> AMCHP's vision is a nation committed to the unfettered wellbeing of women, children, youth, families, and communities so that they may thrive.

# EXECUTIVE SUMMARY

The Association of Maternal and Child Health Programs (AMCHP) launched its latest strategic planning effort in October 2021. The process brought together AMCHP's Board of Directors and staff to decide, examine, and reimagine key areas (i.e., "pillars") of the organization's work for the next five-year period.

## The six pillar areas included:

- Health Equity & Anti-Racism
- Policy & Advocacy
- Communications & Branding
- Youth & Family Engagement
- Membership & Dues
- Technical Assistance, Capacity Building, & Workforce\*
- Partnerships



Starting in October through early November 2021, the CEO led the strategic planning process with members of the AMCHP community, including staff self-selecting to co-lead the pillar areas and staff working groups (i.e., pillar-specific working groups and a combined working group across pillar areas). Co-Leads facilitated their various working groups through three process phases: discovery, strategy development, and plan building.

The Board of Directors met semi-monthly to focus on each of the strategic planning pillar areas. Co-Leads led discussions and provided background information, including history, current efforts, issues for consideration, opportunities, and recommendations for reimagining and/or scaling-up efforts through 2027. Simultaneously, the full AMCHP staff met twice – in January to formally launch the process, and in July to review the preliminary goals generation by the working groups.

A Key Informant Interviews group was convened in March 2022 to systematize external feedback (i.e., draft questions/ interview protocol and work in conjunction with working groups to determine interviewees). Interviews sought to expand perspectives on AMCHP's work and where we might be able to sharpen our efforts over the next five-years.

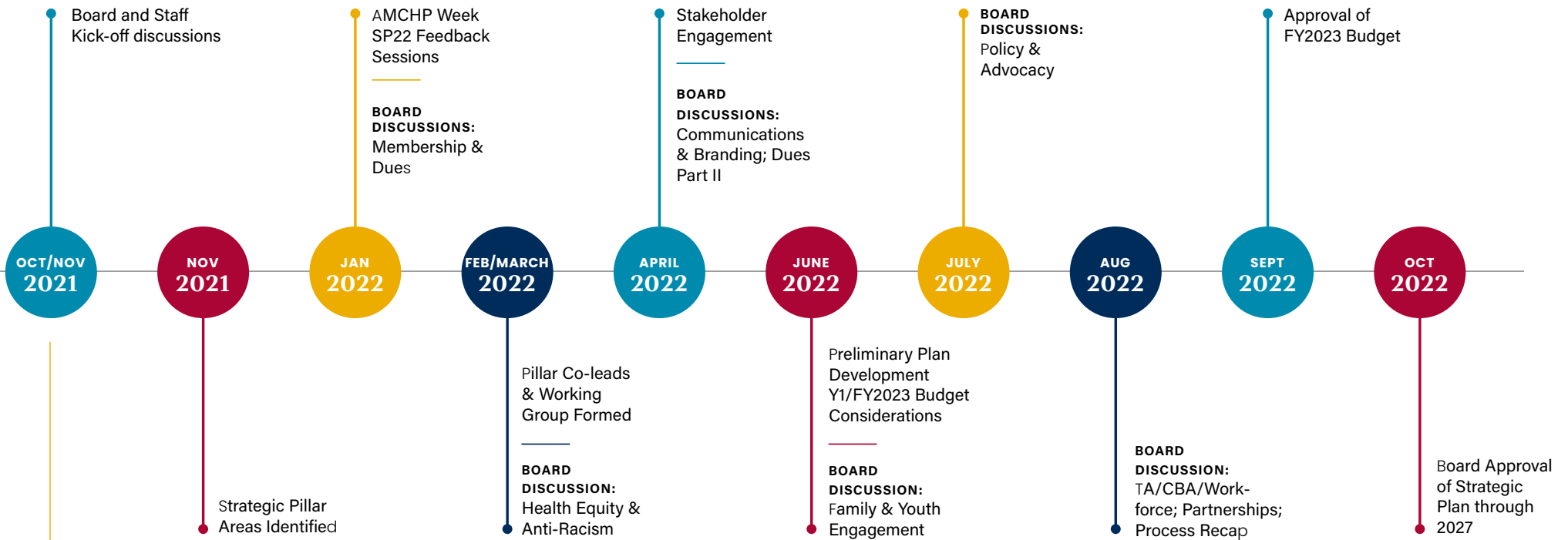
The Board of Directors approved AMCHP's fiscal year 2023 budget that aligns with year-one implementation of the organization's strategic plan. The board subsequently approved the new five-year strategic plan, AMCHP Future 2027, on October 20, 2022.

As AMCHP moves into implementation of its strategic plan, we commit to transparency in terms of how we are meeting our strategic objectives.

\*The *Technical Assistance, Capacity Building, & Workforce* pillar goals are featured in our strategic plan under a new, more comprehensive area of work, Maternal & Child Health Talent.



# STRATEGIC PLAN TIMELINE



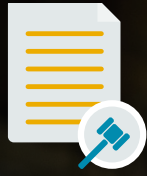




# HEALTH EQUITY & ANTI-RACISM

## Goals

1. Model and promote informed practices and policies that advance health equity and anti-racism work in maternal and child health (MCH) spaces.
2. Develop and share guidance on how to ensure that our decision-making processes for funding/contractual awards or other organizational items align with organizational values.
3. Develop and/or seek trainings and resources that create a shared understanding of equity, diversity, structural racism, disability justice, and belonging principles among AMCHP staff, Board members, partners, and membership.
4. Foster and maintain intentional partnerships to ensure inclusive and diverse program portfolios and policy initiatives.



## POLICY & ADVOCACY

### Goals

1. Strategically form and strengthen external partnerships to align policy and advocacy efforts to improve equitable health outcomes for MCH populations.
2. Build the competency of the MCH workforce and other stakeholders to engage in policy work at all levels.
3. Grow and sustain internal capacity across teams to elevate policies to improve the health and well-being of all MCH populations.
4. Integrate and operationalize AMCHP's organizational values and commitment to equity and anti-racism into our policy work.





# YOUTH, FAMILIES, & PEOPLE WITH LIVED EXPERIENCE

## Goals

1. Increase the representation of family members, youth/young adults, and other individuals that are connected to and impacted by the MCH ecosystem in AMCHP's operations and programming.
2. Advance AMCHP's internal knowledge and capacity to model and implement best practices for engaging families, youth, young adults, and other persons with lived experience across all AMCHP's organizational policies, internal operations, as well as external-facing work.
3. Prepare and train AMCHP members and others in the MCH workforce to effectively connect, engage, and partner with families, youth/young adults, and other persons with lived experience in their Title V related work.

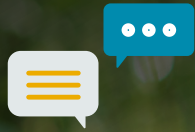


# MATERNAL & CHILD HEALTH TALENT

## Goals

1. Foster trauma-informed, equity-centered, and whole-person-focused workplaces internally and with members.
2. Internally develop and apply a standard and unified MCH workforce development and capacity-building nomenclature. AMCHP will share this language with major workforce centers, partners, and members.
3. Support a diverse (with respect to race, ethnicity, gender, educational background, and other aspects of identity) MCH workforce and sustain this workforce by fostering a pipeline of professionals into the workforce.
4. Support members to reduce burnout, reduce their own staff turnover, and grow their talent and improve job satisfaction through diversity, equity, and inclusion principles.
5. Coordinate and align with partners to ensure that Title V programs and individual staff have equitable, consistent access to capacity-building opportunities that align with their changing priorities.





# COMMUNICATIONS & BRANDING



## Goals

1. Expand AMCHP's brand and work recognition in the maternal and child health field so that our organization is known beyond our members, partners, and collaborators and ensure that our communications reach audiences across a variety of sectors.
2. Position the AMCHP brand as a leader in MCH subject matter expertise and a trusted source of information and technical assistance for members, partners, and communities working to improve MCH outcomes.
3. Grow and streamline AMCHP's communications by increasing the department's and AMCHP's staff capacity to create consistent, timely, and accessible resources that support evidence-based decision-making and advance MCH priorities.
4. Strengthen AMCHP's position as a trusted ally for communicating and raising awareness of the policies, investments, and critical emerging issues that affect MCH populations and for elevating stories from the field by lifting the voices of community-based organizations and people with lived experience.



# PARTNERSHIPS



## Goals

1. Develop an internal structure for partnership development and relationship management, inclusive of internal reflection on growth, stagnation, and regression of relationship quality.
2. Increase the number of diverse funder relationships/partnerships so that AMCHP has a broader range of public and private funders.
3. Increase the number of high-quality relationships with community-based organizations, people with lived experience, thought leaders, and others who can advance our mission and initiatives.
4. Promote AMCHP's ability to work as a bridge between partners by institutionalizing opportunities for partner-to-partner engagement, both in person and virtually.





# MEMBERSHIP



## Goals

1. Examine our membership structure with an eye toward increasing representation, and shifts and trends in Title V structures, workforce, and partnerships.
2. Actively and continuously ensure that membership reflects the full spectrum of Title V program staff and maternal, child, and adolescent health (MCAH) stakeholders.
3. Cultivate a sense of belonging among Title V staff and other MCH stakeholders by providing space for communicating issues; articulating workforce- and population-level priorities; disseminating information and resources; and expanding community building, peer support, and leadership development.
4. Increase involvement and active membership from Title V staff across roles and encourage the active involvement of individual voices that may not already be tethered to formal MCAH programs.



**W**e acknowledge the immeasurable contributions of the Board of Directors, and the AMCHP staff, particularly the strategic planning Co-Leads and Working Groups:

**Health Equity & Anti-Racism**

**CO-LEADS:** Courtney Salley & Justin Huang

**WORKING GROUP:** Salome Araya, Lauren Blachowiak, Cheryl Clark, Anna Corona, Michelle Crawford, Mallory Cyr, Amani Echols, Michelle Edwards, Mikayla Frye, Giannina Ong, Jessica Stieger, Nia Sutton

**Policy & Advocacy**

**CO-LEADS:** Lauren Blachowiak & Amani Echols

**WORKING GROUP:** Amy Haddad, Jake Mulroy, Laura Powis, Jess Simon

**Youth & Family Engagement**

**CO-LEADS:** Iliana Siarmalis-White & Michelle Crawford

**WORKING GROUP:** Sabra Anckner, Lauren Blachowiak, Kate Taft, Stacey Tuck

**Technical Assistance, Capacity Building, Workforce**

**CO-LEADS:** Mikayla Frye & Laura Powis

**WORKING GROUP:** Anna Corona, Ben Kaufman, Lynda Krisowaty, Maura Leahy, Nia Sutton, Kristina, Audra Bishop (Colorado), Kate Schedel (Indiana)

**Communications & Branding**

**CO-LEADS:** Chery Manon Espinal, Alyson Northrup, Atyya Chaudhry

**WORKING GROUP:** Brittany Frew, Eve Giordano, Ben Kaufman, Lynda Krisowaty, Maura Leahy, Giannina Ong, Caroline Stampfel

**Membership & Dues**

**CO-LEADS:** Terrance Moore & Nikeisha Ogletree

**WORKING GROUP:** Stacy Collins; Linnard Corbin; Ben Kaufman, Iliana Siarmalis-White, Jessica Stieger

**Partnerships:**

**CO-LEADS:** Kristina Wint & Paige Bussanich

**WORKING GROUP:** Anna Corona, Caroline Stampfel, Stacey Tuck

**Key Informant Interviews**

**CO-LEADS:** Caroline Stampfel

**WORKING GROUP:** Mallory Cyr, Ben Kaufman, Stacey Tuck

**INTERVIEWERS:** Lauren Blachowiak, Amani Echols, Ben Kaufman, Terrance Moore, Caroline Stampfel, Nia Sutton, Stacey Tuck, Noeli Vasquez, Brianna Williams (Morgan State Doctoral Student)

AMCHP appreciates our external partners for their time and willingness to provide thoughtful observations and feedback on the organization's strategic direction:

Rebecca Abbott, Society for Maternal Fetal Medicine

Mayra Alvarez, The Children's Partnership

Jermane Bond, PhD, The Weitzman Institute

Alyssa Bosold, Mathematica

Imani Evans, Louisiana

Eileen Forlenza, Consultant

Jalen Franklin, North Carolina

Mike Fraser, PhD, Association of State and Territorial Health Officials

Lori Freeman, National Association of County and City Health Officials

Sharon Gilmartin, Safe States

Syria Harrell, Pennsylvania

Lyn Kieltyka, PhD, Louisiana

Carolyn Mullen, Association of State and Territorial Health Officials

Andriana Segovia, Consultant

Jamila Taylor, PhD, The Century Foundation

Jonathan Webb, Association of Women's Health, Obstetric and Neonatal Nurses

Jason Vitello, Colorado