Healthy Families Action Team Meeting #1 July 30, 2020 Virtual 10 – 11 AM

Attendance

- Alysia Mastrangelo
- Andrea Mahon
- Barbara May
- Carolyn DeBoer
- Cecilia Zalkind
- Debbie Nazzaro
- Ellen Maughan
- Jessica Lipper
- Joanne Rosen

- Judith Jeanty
- Keri Logosso-Misurell
- Loretta Kelly
- Maria Baron
- Merle Weitz
- Pamela Taylor
- Tara Chalakani
- Tyree Oredein
- Victoria Brogan

Welcome and Introductions, Role, Timeline and Expectations: Victoria Brogan

Welcomed all participants and introduced co-chairs and Department of Health staff. Refine focus area and create an Action Plan. Healthy NJ 2030 website was provided for all to review. <u>https://www.nj.gov/health/healthynj/2030/</u> Due to COVID19 the timeline was changed. Draft objectives will be presented in October, next virtual meeting will be held on August 20th at 2 – 3:30 PM.

Meeting Objectives: Alysia Mastrangelo

Identify focus areas, this will be draft, we can change the focus areas; think about available data, what is missing, what needs to be included. Share available action plans or reports. Narrow down focus areas for the next 10 years. Three cross cutting strategies: Equity, Policy, and Resilience.

Infant, Child, and Adolescent Health: Pamela Taylor

- NJ decreased infant mortality by 12%, strategies need to close gaps for black infant mortality
- Prevention: low birth weight, SIDS, injuries
- Physical activity: CDC guidelines at least 1 hour, increase muscle, quality of sleep, prevents childhood obesity and chronic diseases
- Nutrition: School lunch, children are in school 60% of time, provide a balanced meal, program to teach children how to make healthy meals.
- Immunizations: well visits are critical to monitor a baby's development; early intervention can be successful if early developmental challenges are caught early.
- Mental health and substance abuse use: teen suicide, homicide, stress, vaping (flavors recently banned), teens need support from vaping and prevention programs.
- Adverse Childhood Experiences: ACEs online assessment tool, physical, emotional or verbal abuse rewires a child's brain. What happens at ages zero thru seven can have life-long affects.
- Keri: food security and "school feeding program" (more than school lunch), absenteeism and pediatric asthma
- Maria explained that some issues will overlap because there are three other Action Teams --Access to Quality Care, Healthy Communities, and Healthy Living. The Advisory Council will meet on August 12th to discuss overlapping issues.
- Loretta is on the Healthy Communities Action Team. That Team's focus areas are under development and she will ensure everyone is informed once finalized.
- Cecelia: support for families' mental health, strategic plan around breastfeeding

- Alysia: breastfeeding will be in maternal health.
- Tara: mental health and substance use focus on prevention, JUUL and vaping leads to other substance use, teach children more about wellness, yoga and meditation.
- Debbie: recognizing normal growth and development, educate parents on development and learning disabilities; resources for teens to quit vaping (in addition to prevention and in addition to quit resources for adults).

Healthy Behaviors: Alysia Mastrangelo

- COVID's impact on kids' screen time and exercise (remote learning)
- Walkable communities, not safe or no sidewalks in rural areas
- Immigrant population culturally appealing healthy foods
- Cover cradle to grave
- Obesity adults who are obese likely to have children obese
- Intimate partner abuse, abuse increased during COVID19
- SUD should include vaping
- Keri: self-regulation tools like mindfulness and yoga
- Alysia: children with autism program for food preparation
- Victoria: "walking school bus" pilot program
- Joanne: hospice (last 6 months of life) vs. palliative (any point during serious illness), care for caregivers, manage pain, helps with services, grief support
- Pamela: parents role modeling healthy behaviors for their kids, parenting support

Family Friendliness: Tyree Oredein

- Ensure the family unit can function and have the resources it needs
- Family caring for children and parents (sandwich generation)
- Navigate child, elder, and self-care
- LGBTQ+ access to care, health disparities effecting this population
- Persons with disabilities, special needs, and medically fragile to access care
- Complex families, removed or returned from incarceration, children taken into foster care or foster child coming into a family, adoption, stepchildren
- Ellen: ability to bring infants to work up to 6 months of age, (\rightarrow ability to breastfeed)
- Debbie: kids who've aged out of foster care system (only 3% graduate from college), homeless youth, homelessness in general (increased due to COVID19)
- Barbara: stigma
- Keri: ACEs and NJ Office of Resilience services and policies should be advanced toward a trauma-informed approach
- Loretta: child-care in the time of COVID, develop a "new normal" for child-care (especially for parents that can't work from home)
- Debbie: other countries didn't shut down child-care because it was needed for essential workers
- Victoria: essential workers had children and adults that need care, PACE sites closed during COVID, measure to keep children and parents safe while at work.

Reproductive Health: Keri Logosso-Misurell

- Aligning HNJ2030 to other existing initiatives: Healthy Women Healthy Families, breastfeeding plan, ACNJ's work, etc.
- How to address pandemic and whatever is next to come

- Identify areas where NJ has fallen short of HP2020 goals
- Build out continuum of care in addition to doulas and community health workers reproductive health care workforce, credentialing, wages, reimbursement, best practices
- Access to contraception, access to high quality maternal care, providers that reflect the diversity of NJ
- Reduce elective c-sections (only if medically necessary)/increase full term vaginal deliveries
- Carolyn: importance of diversity of health care workforce, best practices of clinical care
- Judith: focus on not just the moms but the care team
- Debbie: role of men/dads in reproductive health, STDs (esp. syphilis), ramp up STD-prevention education/messaging, sexual assault, what is consent, response to people who've experienced sexual assault
- Ellen: focus on system and providers in breastfeeding, diversity, goals communities, families, partners, workplace, governmental infrastructure
- Debbie: have we overmedicalized pregnancy and childbirth, avoid induction; expand at home births and nutrition.
- Victoria: medical issues after delivery, expand Medicaid for maternity up to 1 year after delivery

Homework: Victoria

- Add or delete areas, identify existing policies, plans, procedures, and protocols
- What are the gaps and how do we fill them?
- Will follow up with an email and the meeting minutes.
- Next virtual meeting is August 20th at 2 to 3:30 PM.