

Kelsey Minix

M.P.H. Candidate, Global Health Track kelsey.minix@vanderbilt.edu

Practicum Site: Maternal Infant Health Outreach Worker Program Nashville, TN

Practicum Site Supervisor: Tonya Elkins, M.S.W.

MIHOW: Experiencing a Maternal, Child Health Home-visiting Program

Program purpose: MIHOW (Maternal Infant Health Outreach Workers) is a home-visiting organization based in Nashville, Tennessee; however, outreach stretches across four states: Kentucky, Tennessee, West Virginia and Mississippi. MIHOW is a monthly home-visiting program that employs local women to mentor mothers and promote healthy pregnancies, teach health education, connect families to necessary services, and provide resources needed to raise a healthy family. Services are available for women from pregnancy until their child reaches the age of three.

Structure of project: Throughout my time at MIHOW I was able to attend community health meetings including the Fetal Infant Mortality Review (FIMR), Home Visiting Leadership Alliance, and TN Young Child Wellness Council. I also assisted with Renewal House pregnancy and postpartum group sessions and their program evaluation project. For this project, I was responsible for administering a pre-intervention surveys and explaining the consent form. I worked on this particular project throughout the summer: tracking data, entering the data into REDCap, organizing the mother's progress and creating tables to demonstrate their survey results. Additionally, I was provided data from multiple MIHOW sites, where I organized this information to create descriptive statistics and demographic tables. I regularly visited partner sites to train community health workers and recruit Hispanic mothers for MIHOW's current research study to evaluate its effectiveness. I made home visits to Kermit, West Virginia, and Frakes, Kentucky, to observe how MIHOW works in the field.

Outcome and evaluation: The exposure I gained at MIHOW was the most valuable aspect of working with their team. I was introduced to copious amounts of new strategies, populations, and information. Being a part of the many health committees taught me the depth of building a healthy community. Learning about the home-visiting model opened my mind to new ways of building interventions for underserved communities. Observing community health workers taught me the importance of the connection between patient and health worker. Visiting organizations in rural America encouraged me to continue advocating for Appalachian populations and pursue a career where I can serve similar populations.

Conclusion: Working with MIHOW has me more interested in pursuing a career that relates to maternal and child health. I loved the idea that MIHOW utilizes: women helping women. More than that, I loved how MIHOW only employs local women to teach mothers. I firmly stand behind the MIHOW model and one day hope to work for a similar organization.

