

1. Describe the proposed ordinance or resolution. File number: 250711

This is a renewal of a grant through the Wisconsin Department of Health Services (DHS), Division of Public Health (DPH) for "Maternal Health Innovation Projects". Projects focus on promoting and executing innovation in maternal health service delivery through addressing critical gaps in direct clinical care, workforce, partnership and/or community engagement. The project goal is to enhance the direct services we provide to fathers/partners while developing our staff's skillsets and capacity to genuinely, equitably and competently serve fathers/partners. This grant is a 4-year grant from October 1st, 2024, to September 30th, 2028. October 1, 2025 to September 30, 2026 is year 2 of the grant. Contracts will be reevaluated each year.

2. Identify the anticipated equity impacts, if any, of this proposal.

See #3; there would only be positive impacts to equity as highlighted below.

3. Identify which minority groups, if any, may be negatively or positively impacted by the proposal.

DHS-DPH is supporting this project to address the inequitable access to services and resources for fathers and non-birthing partners as they prepare for pregnancy and parenting. Research shows that paternal involvement during pregnancy is linked to numerous positive maternal health outcomes, including reduced risk of maternal depression, improved access to healthcare services, better maternal nutrition, fewer birth complications, increased likelihood of full-term pregnancies, and higher rates of breastfeeding. Despite this evidence, father engagement remains insufficiently integrated into maternal health services. Furthermore, data indicates that many professionals within the child and family services workforce lack the training, skills, and cultural competence needed to support fathers in an equitable, and unbiased manner. Strengthening support for fathers—

4. Describe any engagement efforts with minority communities potentially impacted by the proposal.

This project is geared to target a disenfranchised population in fathers/non-birthing partners, particularly those that identify as BIPOC. Any services we provide are no-cost and will be accessible to both fathers enrolled in our MHD programs and to the City of Milwaukee eligible residents overall. This project collaborates with a grass-roots small business led by Black-identified owners; creating positive investment into effective, trusted and culturally competent service providers in addition to the benefit of the services themselves on minority communities.

5. Describe how any anticipated equity impacts of the proposal will be documented or evaluated.


We track demographic data of all enrolled families, monitor the services provided, compliance, outcomes and trends through quality improvement grant metrics. We will utilize pre and post surveys for all of the fathers/partners we serve; providing space to track customer satisfaction and knowledge/skill growth. The same will apply to the professional development component of the grant where pre and post surveys will be completed by all MHD staff that are trained in fatherhood engagement and creating accountability metrics in our staff performance management around equity (in this case specific to inclusive service to all family makeups/members).

6. Describe strategies that will be used, if any, to mitigate any anticipated equity impacts.

We use data and trends analyzed by Public Health Strategists and Epidemiologists to inform our practices on health equity, social determinants of health, disparities and infant mortality. we survey clients to gauge their satisfaction and incorporate their feedback into our practices. Community impact assessments/improvement plans conducted by MHD help to assure that our strategies/priorities as a department are informed by the community. Lastly, we place strong value on hiring a diverse workforce that reflects the community and partner with community-based organizations that align with the mission/values of MHD; particularly around anti-racism and health equity.

Name: **Rosamaria Martinez**

Signature:

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Date:

9/9/2025