

# Projects for Summer 2023



National **MCH** Workforce  
Development Center  
Advancing Health Transformation

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**Please note that internship project details (tasks, deliverables, work setting) may be subject to change depending on agency priorities or COVID-19 precautions.**

# California Department of Public Health, Maternal Child and Adolescent Health Division

**Location:** Sacramento, CA

## **Project Description:**

The California MCAH Division strives to utilize data and evidence based and promising (EB/P) practice strategies across Title V funded programs to improve the MCAH health outcomes among Californians. A current practice is to host internal, cross Division deliberations by MCAH Domain to review data and to share the status of programs and practices. The goal of the proposed project is to maximize and improve the Maternal Infant Health (MIH) Domain collaborative process and identify gaps and areas for improvement in program planning to ensure use of known EP/P practice approaches. The current MIH Domain cross Division process includes a facilitated discussion among representatives from the MIH Branch, the Child and Adolescent Health Branch, the Program Evaluation Branch and Epi and Surveillance Section. The current MIH Domain collaborative process fosters coordination, communication, staff engagement and satisfaction. In addition, the MIH Domain convenings offer an opportunity for process improvements to incorporate literature reviews for EB/P practices and compare to existing programs to identify gaps. Each MIH Domain meeting has an area of focus with recent areas including mental health, perinatal substance use, preterm birth, and a review of Title V funded services provided to American Indian populations by a sister agency (Indian Health Services, Dept of Health Care services). and Postpartum Care. During the summer 2023 internship, the focus of the MIH process for sharing and identification of EB/P best practices will be on gestational diabetes.

[Maternal, Child and Adolescent Health Division \(ca.gov\)](#)

[Title V Maternal and Child Health Block Grant \(ca.gov\)](#)

[Gestational Diabetes and Postpartum Care](#)

## **Project connection to Title V agency's priorities:**

The MIH Domain meetings focus on areas that align with the MCAH Title V priorities for Maternal/Women and Infant Health.

Women/Maternal Priority Need: Ensure women in California are healthy before, during and after pregnancy

- Focus Area 1: Reduce the impact of chronic conditions related to maternal mortality.
- Focus Area 2: Reduce the impact of chronic conditions related to maternal morbidity.
- Focus Area 3: Improve mental health for all mothers in California.
- Focus Area 4: Ensure optimal health before pregnancy and improve pregnancy planning and birth spacing.
- Focus Area 5: Reduce maternal substance use.

Infant Priority Need: Ensure all infants are born healthy and thrive in their first year of life

- Focus Area 1: Improve healthy infant development through breastfeeding.
- Focus Area 2: Improve healthy infant development through caregiver/infant bonding.

Priority Need: Reduce infant mortality, with a focus on eliminating disparities

- Focus Area 3: Reduce Black Infant Mortality.
- Focus Area 4: Reduce preterm births.

## **Describe how the proposed project(s) center(s) equity:**

Across all California MCAH Title V priorities there is a focus on health equity. The project will account for equity in the MIH Domain meetings when reviewing data and identification of EB/P practices. In addition, improvements to the MIH Domain meeting process may include identification of key questions that facilitate an assessment of the effect on equity as existing programs are reviewed and EB/P practice gaps identified.

## **Project Objectives/Activities/Deliverables:**

**Objective 1:** Identify EB/P practices for a priority topic area planned for MIH Domain Team meeting discussion, specifically, gestational diabetes with a focus on disparities (e.g., race/ethnic among Native American, Asian, Black, LatinX).

**Activity 1a:** Conduct a literature review for EB/P practices with a focus on public health primary prevention approaches to gestational diabetes.

- **Deliverable 1:** Compile literature review and summarize, including a list of EB/P practices in preparation for MIH Domain Team meeting.

**Activity 1b:** Review the literature search results and EB/P practice list with the MCAH Subject Matter Experts (SMEs) in nutrition, diabetes in pregnancy, and preconception health, which are areas within MCAH in which there may be efforts to implement public health primary prevention approaches to gestational diabetes.

**Activity 1c:** In consultation with SMEs, compare recommended EB/P practices for public health approaches to gestational diabetes and compare to current MCAH programs/initiatives to identify gaps.

- **Deliverable 2:** Compile a list of recommended EB/P practices for prevention of gestational diabetes.

**Objective 2:** Identify improvements to the MIH Domain Team meeting process to incorporate evidence based and promising (EB/P) practices, a gap analysis and corresponding consideration of equity.

**Activity 2a:** Attend one monthly MIH Domain Team meeting to observe the existing process and potential areas for improvement to integrate EB/P practice review and considerations for equity.

**Activity 2b:** Help to plan and implement one MIH Domain meeting on the subject of public health primary prevention of gestational diabetes and incorporate new processes for EP/P practice review, gap analysis, and considerations for equity.

- **Deliverable 1:** Compile an outline of the MIH Domain Team meeting process including planning steps and activities as well as a facilitation guide for the meeting.

**Activity 2c:** Assess the outcome of the new MIH Domain Team processes to identify what worked, what to disregard, what to refine.

- **Deliverable 2:** Make recommendations for improvements to the MIH Domain Team meeting process.

**Objective 3:** Prioritize identified gestational diabetes program gaps with consideration of associated opportunities to improve health inequities.

**Activity 3a:** Based on activities already occurring as identified by the SMEs, identify and apply a prioritization framework to the identified prevention strategies for gestational diabetes.

- **Deliverable 1:** Compile a prioritized list of recommended strategies to address program gaps with consideration of potential impact on health inequities.

**Activity 3b:** Develop a presentation of recommended public health gestational diabetes EP/P practices.

- **Deliverable 2:** Present to MIH branch and leadership team.

## **Skills required for the project(s):**

Microsoft Excel

Microsoft PowerPoint

Program Planning

Literature Review Skills

Facilitation Skills

Synthesis of Information

Communication Skills

Presentation Skills

**Required Technology:**

Intern(s) would be granted access to network folders and virtual access to Microsoft office apps. Use of Zoom and Microsoft Teams. Required PHETTS training will be provided remotely.

**Preferred Internship Work Setting (Remote/In-Person/Hybrid):**

Remote

**Does your agency require a contractual agreement (e.g., memoranda of understanding, hiring paperwork, etc.) between a student's academic institution and your agency?**

Not sure, (Note: we will need a final answer with respect to this issue before we can place student interns with your agency).

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# Massachusetts Department of Public Health, Racial Equity Strategic Pathway Implementation Team

**Location:** Boston, MA

## **Project Description:**

The Massachusetts Department of Public Health (MDPH) is committed to ensuring all residents of the Commonwealth have the opportunity to attain the highest levels of health and well-being. According to the United Health Foundation America's Health Rankings, Massachusetts is consistently one of the healthiest states in the nation. However, lost in that important achievement are the stark realities of health inequities, particularly racial inequities. MDPH is dedicated to understanding the social determinants that contribute to inequities seen in communities across Massachusetts and taking action to eliminate them. Improving programs' capacity to collect and use data to promote racial equity was identified as a priority need through the Racial Equity Movement in the MDPH Bureaus of Family Health and Nutrition (BFHN) and Community Health and Prevention. This need inspired a quality improvement project to develop a Racial Equity Data Road Map to provide tools and resources for using data to inform public health action. This project is led by the MDPH Racial Equity Strategic Pathway Implementation Team (RESPIT). The vision for the Road Map is to improve the use of data to inform racial equity work in MCH programs and initiatives so that services are delivered in a more equitable way, optimizing health and well-being for all residents of the Commonwealth. The Road Map guides its users to authentically engage the community, frame data in the broader historical and structural contexts that impact health, communicate that inequities are unfair, unjust and preventable, and design solutions that address the root causes of these issues. It is intended to be a living document that is updated based on feedback from its users. The first version of the Road Map was shared with MDPH staff in April 2020 and posted on the mass.gov website in December 2020. The Road Map is currently being used on the national stage in a Learning Collaborative (the Data for Racial Equity Achievement in MCH [DREAM] Learning Community) being led by the Association of State and Territorial Health Officials (ASTHO) with funding and support from the CDC MCH Epidemiology Program focused on supporting states to use data for racial equity work. The RESPIT team seeks a Title V Internship Team to assist in revising and updating the Road Map. This will include conducting interviews with key partners and collaborators both internal and external to MDPH to solicit feedback on the Road Map and identify areas for improvement. This will include working with the CDC/ASTHO DREAM Learning Community to incorporate lessons learned from the experiences of other states using the Road Map.

## **Project connection to Title V agency's priorities:**

This work aligns with the Massachusetts Title V priority for 2020-2025 to eliminate institutional and structural racism in internal MDPH programs, policies, and practices to improve maternal and child health. This priority is a continuation of the racial equity priority that MA established in 2015 which focused on promoting health and racial equity across all MCH domains by addressing racial justice and reducing disparities. The state performance measure (SPM) for this priority is "by 2025, increase to 95% from baseline (64% in 2019) the percent of BFHN and BCHAP staff who have used any racial equity tool or resource in their work." The Racial Equity Data Road Map, which serves as a collection of guiding questions, tools, and resources to assist programs in taking concrete steps to better identify, understand, and act to address racial inequities, is an important resource for driving progress on this SPM.

## **Describe how the proposed project(s) center(s) equity:**

The Road Map project specifically centers equity by providing guidance and resources to support programs to use data as a tool toward eliminating institutional and structural racism. An explicit focus on racism allows for the development of frameworks, tools, and resources that can be applied to racial inequities that impact health outcomes. The Road Map encourages programs to engage the community or population that is being centered in their work in the interpretation of data and design of solutions. Ensuring the inclusion of community expertise, feedback, participation, and decision making are critical elements to using a racial equity approach to data use and interpretation. Without this element, programs and practices are likely to fail, or worse, to further reinforce existing inadequate and inequitable power

structures.

### **Project Objectives/Activities/Deliverables:**

**Objective 1:** Review the Racial Equity Data Road Map and identify areas in need of updating or revision.

**Activity 1:** Become oriented to the RESPIT team by attending all meetings and meeting individually with team members.

**Activity 2:** Read the Racial Equity Data Road Map.

**Activity 3:** Develop a workplan and timeline for updating the Road Map.

- **Deliverable 1:** Gantt chart outlining activities and timeline for revising the Road Map.

**Objective 2:** Gather information from RESPIT team members and other key partners on suggestions and recommendations for updating the Road.

**Activity 1:** Conduct key informant interviews (KIIs) with partners, collaborators, and users of the Road Map and summarize findings.

- **Deliverable 1:** Development of a semi-structured interview guide for KIIs.
- **Deliverable 2:** Analysis and synthesis of results from KIIs.

**Activity 2:** Gather information from other states and national organizations on additional tools and resources for supporting the use of data to promote racial equity to include in Road Map revision.

- **Deliverable 3:** Menu of existing tools and resources to promote use of data for racial equity work for consideration to include in the Road Map.

**Objective 3:** Work with RESPIT and the MDPH Communications team to finalize the Road Map revision and present it in a way that is accessible and user friendly.

**Activity 1:** Work with RESPIT team to revise and update the seven sections of the Road Map incorporating information from activities under Objectives 1 and 2.

- **Deliverable 1:** Final updated and revised Racial Equity Data Road Map (version 2.0).

**Activity 2:** Explore options for presenting the Road Map in an interactive web-based format and present options to RESPIT.

- **Deliverable 1:** PowerPoint slides for presentation to RESPIT members on options for presentation/dissemination of Road Map in an interactive web-based format.

### **Skills required for the project(s):**

Microsoft PowerPoint

Program Planning

Literature Review Skills

Qualitative Methods (Implementation) (includes key informant interviews, focus groups, photovoice, etc.)

Qualitative Methods (Analysis)

Facilitation Skills

Synthesis of Information

Communication Skills

Presentation Skills

### **Required Technology:**

Need for MDPH network and email access, Office 365 access (including Microsoft Teams), VPN to access agency level shared folders.

### **Preferred Internship Work Setting (Remote/In-Person/Hybrid):**

Remote

**Does your agency require a contractual agreement (e.g., memoranda of understanding, hiring paperwork, etc.) between a student's academic institution and your agency?**

No

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# Minnesota Department of Public Health, Child and Family Health - Children and Youth with Special Health Needs

**Location:** Saint Paul, MN

## **Project Description:**

The Minnesota Department of Health's Children and Youth with Special Health Needs (MDH CYSHN) Program works to ensure that children and youth with special health needs and disabilities (CYSHN/D) and their families enjoy a full life and thrive in systems and communities that support them. An estimated 225,400 children and youth in Minnesota (approximately 17.4% of children 0 -17 years old) are living with a special health need, which includes a range of chronic physical, developmental, behavioral, and emotional conditions. These children and youth often need a variety of services and supports wrapped around them, including in-home supports. We acknowledge that family caregivers are providing an overwhelming majority of the long-term care needed to support CYSHN/D in the home, which comes at a high cost to the financial, physical, and emotional well-being of the caregiver. We also acknowledge that we need to transform systems around long-term care to reduce the burden currently being placed on caregivers – and we need to build the capacity of community partners to collectively ensure that family caregivers have the resources they need to maintain their own health, well-being, and financial security while providing support for others. The MDH CYSHN Program is embarking on a long-term systems transformation initiative to better support family caregivers and seeks assistance from a student team on this initiative. The student team will first work closely with CYSHN Program Staff to facilitate a series of sessions with family support organizations and other partners to identify strategies for building capacity of the community to collectively transform systems around caregiving. They will then work closely with CYSHN Research Staff to develop an evaluation plan and data dictionary to help the team to be able to measure progress in achieving the identified strategies moving forward.

## **Project connection to Title V agency's priorities:**

This project relates to the following Title V priorities:

- Ensuring that all CYSHN/D and their families can access services and supports needed to thrive.
- Supporting parents and caregivers socially and emotionally with family-focused activities, policies, and education.

## **Describe how the proposed project(s) center(s) equity:**

This project centers equity by ensuring those with special health needs are centered and prioritized. The students will work on a project that prioritizes caregivers who are key to ensuring equitable health access and support for these communities as they interface the most with the health care system.

## **Project Objectives/Activities/Deliverables:**

**Objective 1:** Co-facilitate a series of sessions with community partners to identify systems change strategies related to supporting family caregivers.

**Activity 1:** Meet and greet with CYSHN Staff to orient students to overall project. A series of meetings will be held with various CYSHN staff to provide needed background knowledge for completing the work.

- **Deliverable 1:** Student participation in meeting(s) with CYSHN staff.

**Activity 2:** Work with CYSHN staff to develop agendas for meetings at which partners will identify strategies for increasing family caregiver support. Meeting dates will be predetermined so planning will focus on meeting content rather than logistics.

- **Deliverable 2:** Agenda and meeting notes. Summary of strategies for increasing family caregiver support are identified and documented.

**Activity 3:** Designing an infographic and/or report outlining the various strategies to increase support for family caregivers to post on MDH website and share with community.

- **Deliverable 3:** Summary of Strategies Infographic.

**Objective 2:** Develop an evaluation plan and data dictionary to measure progress in achieving the strategies identified (and selected by the CYSHN staff) during the family caregiver sessions.

**Activity 1:** Complete a scan/inventory of potential evaluation measures based on strategies identified. Potential sources of measures to track performance include: primary and secondary datasets, reports and documents produced by national associations/technical assistance providers, etc.

- **Deliverable 1:** Summary of potential evaluation measures.

**Activity 2:** Develop an evaluation plan along with the development of a proposed data dictionary that includes measures, data collection methods, potential sources and data variables, timelines for collection, etc.

- **Deliverable 2:** Draft evaluation plan with overview of a proposed data dictionary.

**Activity 3** If time allows, facilitate follow-up meeting to share the evaluation plan and data dictionary to gather feedback from community members who participated in strategy development.

- **Deliverable 3:** Presentation notes and summary of feedback from the meeting in which the evaluation plan and data dictionary are shared.

### **Skills required for the project(s):**

Microsoft Excel

Microsoft PowerPoint

Program Planning

Program Evaluation

Literature Review Skills

Facilitation Skills

Synthesis of Information

Communication Skills

Presentation Skills

Social Media Skills

Other, Please specify: -- Community engagement

### **Required Technology:**

Will provide an agency email so that students can access our agency SharePoint and Microsoft Teams. Competence in Zoom and/or Teams - both participating and facilitating preferred.

### **Preferred Internship Work Setting (Remote/In-Person/Hybrid):**

Remote

### **Does your agency require a contractual agreement (e.g., memoranda of understanding, hiring paperwork, etc.) between a student's academic institution and your agency?**

Yes, please describe: -- The state of MN has a Student Intern Application, which is signed by the student. We also have an Internship Agreement, which is signed by the Student, Academic Institution (Faculty Advisor), and MDH Supervisor.

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# Oklahoma State Department of Health, Division of Maternal and Child Health Services

**Location:** Oklahoma City, OK

## **Project Description:**

This summer we would like an intern team to focus on assisting subject matter experts in Oklahoma with the development of a training Toolkit for entities and community health workers who support grandparents (and great grandparents/aunts/uncles, etc.) who are raising grandchildren. MCH and partners have completed a survey to identify topics grandparents want to learn more about. We need assistance pulling the materials together, branding the Toolkit, and helping to formalize training for those who will implement the Toolkit. Additional assistance in planning a Toolkit evaluation would also be ideal.

## **Project connection to Title V agency's priorities:**

During Child Death Review Team meetings, the role of grandparents as both caregivers and as sources of training and information for new parents has been pivotal in several cases, with respect to both risk and protective factors. The hope is to develop a Toolkit to provide grandparents with skills and evidence-based information to further the protective effect of grandparents for all Oklahoma infants and children. Reducing infant mortality is an Oklahoma Title V priority, and providing grandparents with information on car seat safety, safe sleep, crying norms, mental health, and other resources for new parents will directly affect this priority. Mental health for all MCH populations, another priority, would also be positively affected by providing grandparents raising grandchildren with additional resources and tools to be more effective. Additionally, the Oklahoma priority focused on health equity relates to this project, as grandparents raising grandchildren are an often overlooked population and the children they are caring for are more likely to be from families where substance abuse, generational poverty, and incarceration have occurred.

## **Describe how the proposed project(s) center(s) equity:**

This project centers equity by assuring inclusion of grandparents from the very beginning planning stages of the project. The intent is to continuously receive feedback and participation from grandparents throughout the entire process. In Oklahoma, grandparents, even those who are not raising or living with their grandchildren, may culturally be the voice of authority when it comes to raising children. The intent of this project is to assure that grandparents who need or want up-to-date information about safety, child development, mental health, respite and other resources, have those needs met in a manner that they will be able to effectively access.

## **Project Objectives/Activities/Deliverables:**

**Objective 1:** Toolkit Compilations by Child Age Group

**Activity 1:** Assure that subject matter experts have completed their contributions to resources for inclusion in the Toolkit.

- **Deliverable 1:** Checklist of pre-determined topics to determine that information for select subject matter is complete.

**Activity 2:** Work with Toolkit Leadership Team and Communications Dept to develop branding for Toolkit.

- **Deliverable 2:** Branding Information for Toolkit.

**Activity 3:** Work with Toolkit leadership team to put together a Train the Trainer workshop for those who will implement the toolkit.

- **Deliverable 3:** Complete Train the Trainer workshop outline.

**Objective 2:** Develop Evaluation Plan for Toolkit implementation.

**Activity 1:** Review subject matter expert presentations and meet with Toolkit Leadership team to determine evaluation approach.

- **Deliverable 1:** Meeting with Toolkit Leadership team.

**Activity 2:** Determine method of evaluation best suited for grandparents.

- **Deliverable 2:** Focus group or key informant interviews with grandparents to obtain initial feedback about the Toolkit prior to launch.

**Activity 3:** Produce draft evaluation plan for team review.

**Deliverable 3:** Draft Toolkit evaluation plan.

**Objective 3:** Assist in promoting Toolkit.

**Activity 1:** Work with Toolkit Leadership team to determine partners for training.

- **Deliverable 1:** Partner List and contact information.

**Activity 2:** Assist with social media strategy.

**Deliverable 2:** Develop 3-5 potential posts for use on social media to promote the Toolkit with partners.

**Activity 3:** Work with Communication Dept to develop a flier that can be modified by partners to promote the Toolkit with grandparents.

**Deliverable 3:** Draft of an editable flier.

**Skills required for the project(s):**

Microsoft Excel

Microsoft PowerPoint

Program Evaluation

Qualitative Methods (Implementation) (includes key informant interviews, focus groups, photovoice, etc.)

Synthesis of Information

Communication Skills

Presentation Skills

Social Media Skills

**Required Technology:**

Remote interns would need a laptop and printer access. We would assure the interns are provided with a State email and TEAMS and any shared drive folders as needed. Access and familiarity with Google drives would be helpful.

Proficiency in Microsoft products is needed.

**Preferred Internship Work Setting (Remote/In-Person/Hybrid):**

No Preference

**Does your agency require a contractual agreement (e.g., memoranda of understanding, hiring paperwork, etc.) between a student's academic institution and your agency?**

We have a form for internships. It is fairly simple and requires signatures of student's faculty advisor, MCH staff person and the student.

**Is there affordable temporary housing available for the students near your agency?**

I don't know

**What is the typical cost of a furnished short-term rental or sublet near your agency?**

\$701-\$900/per person

**Is your agency easily accessible by public transportation?**

Yes

**Are services such as Lyft or Uber available near your agency?**

Yes

**Please include 2-3 sources where students may find temporary housing. Examples include listservs or universities close by that may have sublease websites or dormitory housing available. Note: Since the student interns will be likely unfamiliar with the area, if your state is selected as an internship site, the expectation is that you will provide some information to the students to help them identify housing in the area. Also, it is important to recognize that most students will not have cars. As such, recommended housing should be close to public transportation.**

There are two universities close to Oklahoma State Department of Health. University of Oklahoma Health Science Center is 1.5 miles away and Oklahoma City University is 4 miles away. Airbnb and VRBO are also good options for short term leases, although a sublet from a local university student is likely more affordable.

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**Location:** Portland, OR

### **Project Description:**

Oregon has long been a leader in having one of the highest chest/breastfeeding rates in the country. However, despite high chest/breastfeeding initiation rates (87.2%), chest/breastfeeding duration (34.2% exclusive BF at 6 months) continues to be a challenge for much of the population and falls short of The American Academy of Pediatrics (AAP) recommendations. Stopping chest/breastfeeding is often due to lack of support – in the health care system, in the community, or in the workplace. Disparities exist for exclusive chest/breastfeeding for six months with lower rates among African American or Black, Asian, and Hispanic Oregonians. Oregon has built a robust system of home visiting programs including its newest addition, Family Connects Oregon, the universally offered nurse home visiting program that will eventually be available to all families with a newborn in Oregon. This project contributes to a larger effort to support policy, system and environmental change for lactation support across Oregon. Continuity of care for lactation services should be consistent and collaborative across time and various providers in community settings. Specifically, the aim of this project is to support continuity of care in lactation through development of a lactation support operational policy and implementation plan for home visit programs that addresses the institutional supports and advanced training needs of the workforce to ensure high quality lactation care. Recently Title V staff have facilitated networking across local public health agencies about gaps in access to lactation care and reimbursement for services. It is also planned in winter 2023 to have a review and revision of the home visiting nurse clinical guidelines, including those for lactation and nutrition. The Title V MCH internship students would join an existing team that has begun cross-program bridging between staff in Title V (nutrition, nursing) and home visit programs (workforce development) along with access to a network of home visitors across Oregon. The student interns would research best practice guidelines for home visiting programs that offer lactation support, including gathering feedback from state and local home visiting staff and developing a Chest/Breastfeeding Support Toolkit for home visiting programs and training to support implementation of the Toolkit. The target population for implementation the Chest/Breastfeeding Support Toolkit are home visitors and home visiting supervisors in Oregon's home visit programs: Family Connects Oregon, Babies First!, CaCoon (CAreCOOrdinatioN), Nurse Family Partnership. Non-nursing home visiting models like Healthy Families Oregon, Early Head Start and Relief Nurseries, dependent on their program capacity and interest may also be included.

### Webpages:

- <https://www.oregon.gov/oha/PH/HEALTHYPEOPLEFAMILIES/DATAREPORTS/MCHTITLEV/Pages/PriorityAreas.aspx> for information about the Breastfeeding priority
- <https://www.oregon.gov/oha/PH/HealthyPeopleFamilies/Babies/HomeVisiting/Pages/index.aspx> for information about home visiting in Oregon

### **Project connection to Title V agency's priorities:**

Oregon's Title V program provides leadership for policy and system development efforts related to maternal/women's health including support for home visiting. Oregon's Title V Framework for Maternal, Child and Adolescent Health addresses national and state priorities through its efforts focused on policies and systems, workforce capacity, family and community capacity, and assessment and evaluation to achieve positive outcomes such as thriving and equitable communities, and nutrition and healthy development. This project directly supports Oregon's Strategy 5 - Ensure access to culturally responsive preventive clinical care for low income and undocumented women, and Strategy 2 - Support advanced training, coaching and quality improvement activities for home visitors related to chest/breastfeeding. The Breastfeeding National Priority 4 measures are: A) Percent of infants who are ever breastfed; and, B) Percent of infants breastfed exclusively through 6 months. These strategies together focus on improvement in both access to and the quality of lactation services through Oregon's home visiting programs. In Oregon, Title V local grantees select one or more Title V priorities and then select one or more evidence-informed strategies to implement from the Title V strategy menu provided by state Title V staff. The Breastfeeding priority is one of the most frequently selected, and local grantees most often select advanced lactation training as their strategy under this priority. Through this strategy, grantees have worked to support nurse home visitors become International Board Certified Lactation Consultants

(IBCLC) credentialed to better support their clients. Currently, we do not have procedures or a mechanism in place to evaluate the effectiveness of the investment in training to ensure that high quality lactation services are accessible to the client population.

**Describe how the proposed project(s) center(s) equity:**

Support for human milk feeding contributes to infant mortality reduction. A needs assessment process was conducted with partners and community voices grantees, community-based organizations serving populations of focus: African American/Black families, Hispanic/Latinx families, rural families, homeless families, immigrant and refugee families, and LGBTQ+ youth, with a special focus on transgender youth. Among partners and community voices grantees, chest/breastfeeding was consistently rated as a high priority to increase health equity among those who serve or represent American Indian/Alaska Native, Asian, African American/Black, Native Hawaiian/Pacific Islander, Latinx, immigrant, LGBTQ+ communities and those with disabilities. Addressing gaps in coverage of high-quality lactation support services through evidence-based practices, institutional support, and training has the potential to improve chest/breastfeeding duration and in turn reduce health disparities.

**Project Objectives/Activities/Deliverables:**

**Objective 1:** To obtain information on best practices for providing lactation support from the literature as well as other state and national efforts.

**Activity 1:** Gather evidence from other states, Health Resources and Services Administration (HRSA), best practice literature, with respect to best practices for providing lactation support through home visiting including scope of lactation services, types and regularity of staff training, client education, and referral networks.

- **Deliverable 1:** Summary document describing approaches that address best practices for providing lactation support through home visiting (nurse and non-nurse).

**Objective 2:** To obtain input from state and local home visiting staff in Oregon with respect to their perspective and experiences with the provision of lactation support in home visiting programs.

**Activity 1:** Conduct facilitated listening sessions and/or key informant interviews with state and local home visiting staff to gather practices for lactation support including scope of services, type and regularity of staff training, client education and referral networks.

- **Deliverable 1:** Summary of themes from qualitative data collected from state and local home visiting developed through review of transcripts/listening to recordings. Model policies that incorporate best practices: a) policy for public health nurse home visiting; b) policy for non-nurse home visiting.

**Activity 2:** Develop the Lactation Support Toolkit for Home Visitors aimed at both nurse and non-nurse home visitors.

- **Deliverable 2:** Lactation Support Toolkit for Home Visitors.

**Objective 3:** To develop an implementation and dissemination plan for the Lactation Support Toolkit.

**Activity 1:** Develop an implementation and dissemination plan for the Lactation Support Toolkit for Home Visitors that includes resources for communication, staff training, and referrals.

- **Deliverable 1:** Implementation and dissemination plan for the Lactation Support Toolkit for Home Visitors.

**Activity 2:** Develop webinar presentations for home visiting staff.

- **Deliverable 2:** A slide deck presentation to describe the components of the Lactation Support Toolkit for Home Visitors. If time allows, present one or two webinars to home visitors.

**Skills required for the project(s):**

Microsoft Excel

Microsoft PowerPoint

Literature Review Skills

Qualitative Methods (Implementation) (includes key informant interviews, focus groups, photovoice, etc.)

Qualitative Methods (Analysis)

Facilitation Skills

Synthesis of Information

Communication Skills

Presentation Skills

**Required Technology:**

Agency-specific emails, access to agency level folders and networks, firewalls, competence in Zoom/Microsoft Teams, online onboarding (e.g. information security, OR ethics, prevention of harassment).

**Preferred Internship Work Setting (Remote/In-Person/Hybrid):**

Remote

**Does your agency require a contractual agreement (e.g., memoranda of understanding, hiring paperwork, etc.) between a student's academic institution and your agency?**

Yes, requirements TBD

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## Tennessee Department of Health, Division of Family Health and Wellness

**Location:** Nashville, TN

### **Project Description:**

The students will complete their project in partnership with the Reproductive and Women's Health Section within the Division of Family Health and Wellness. The students will lead a qualitative data collection project to inform efforts to engage more males in the Family Planning program. The first step of the project will be to develop two focus group/key informant interview guides and collect qualitative data (e.g., attitudes towards family planning, accessibility of family planning services within the local health department, what kind of messaging and materials might engage them in family planning, etc.) from males residing across Tennessee as well as from Title X Family Planning Programs in Region IV states to inform efforts related to engaging more males in the family planning program. The second step will be to conduct a theme analysis and prepare a presentation on the findings from the key informant interviews/focus groups and recommendations. Lastly, an optional step related to this project will be to create a series of social media posts and educational materials to promote the availability of family planning services for males in Tennessee.

In addition, the interns may have the opportunity to provide day-to-day programmatic support to some of our sections in need of additional capacity.

As an example, the Early Childhood Initiatives section has been working on developing a standard operating procedures manual for their new staff for several months, but that project has been tabled due to competing priorities. The Title V interns may have the opportunity to assist with developing profiles for each team member and program within the section to include in the manual.

### **Project connection to Title V agency's priorities:**

Increasing access to family planning services is one of the priorities for Tennessee's Title V/MCH Program. There has been limited focus on engaging males in Title X programs as family planning has historically been perceived as a woman's concern. However, there is sufficient evidence to suggest that men desire family planning information and services. This project directly supports Tennessee's Title V action plan to implement Strategies 1 and 2 for SPM 1, which is to increase the percentage of mothers whose pregnancy was intended. Strategy 1 is to increase the knowledge, awareness, and usage of reproductive life plans through PATH across the state of Tennessee. Strategy 2 is to increase rural access to family planning services through telehealth. The PATH framework is a person-centered model designed to help health care providers and staff engage in conversations with people about their sexual and reproductive health, by assessing Parenthood/Pregnancy Attitude, Timing and How important pregnancy prevention is for a patient.

### **Describe how the proposed project(s) center(s) equity:**

During Year 2 of the current 5-year Title V/MCH Block Grant Cycle, Tennessee's program staff dedicated time to synthesizing data and identifying health equity-specific strategies to decrease disparities within each of the identified priority areas included in the action plan. The Family Planning team decided to devote efforts to addressing the place-based disparities that exist within Tennessee's Title X program. Currently, 54 out of the 95 counties in Tennessee are serving less than 21% of the Title X-eligible population. The project will focus on improving overall engagement of men; in particular, concerted efforts will be made to collect input from individuals residing in counties serving less than 21% of the eligible population.

### **Project Objectives/Activities/Deliverables:**

**Objective 1:** Conduct (or assist with conducting) key informant interviews and/or focus groups with males residing across the state and key informant interviews with representatives of Title X Programs in other Region IV states to identify how they have been able to engage men within their family planning programs.

**Activity 1:** Meet with the TN Title X Family Planning team and review available data to understand the landscape of the Title X program in Tennessee. Conduct a literature review to understand barriers and facilitators to engaging males in family planning services, including review of information on [www.fatherhood.org](http://www.fatherhood.org).

- **Deliverable 1:** Literature review on barriers and facilitators to engaging males in family planning services.

- **Deliverable 2:** Development of at least one key informant interview guide (possibly two) and a focus group guide. One key informant interview guide will be designed to explore how other Region IV states have engaged males within their family planning programs. The second area of focus is on males in need of family planning services in Tennessee. The intent is to schedule focus groups to collect qualitative data on the male perception of engaging with Title X family planning services; however, understanding that it might be more of a challenge to schedule focus groups, there might also be a need to conduct key informant interviews with the target population of males. Thus, it might be necessary to develop both a key informant and focus group guide to collect this information from males residing in Tennessee.

**Activity 2:** Partner with local organizations to identify male participants for the key informant interviews/focus groups. Identify contacts from other Title X Family Planning Programs within Region IV. Schedule and conduct key informant interviews/focus groups with males residing across Tennessee and conduct key informant interviews with other Title X Family Planning Programs in Region IV states.

- **Deliverable 3:** Conduct of at least 12 key informant interviews with males (or 3 focus groups with at least 5 males participating in each).
- **Deliverable 4:** Conduct of at least 4 key informant interviews with Title X partners in Region IV.

**Objective 2:** Review qualitative data to complete the theme analysis.

**Activity 1:** Analyze qualitative data collected during the key informant interviews or focus groups.

- **Deliverable 1:** Theme analysis of qualitative data focused on males in TN. It will be sufficient for interns to review transcripts or listen to recordings to identify themes.
- **Deliverable 2:** Theme analysis of qualitative data from Title X Family Planning Programs in Region IV states. It will be sufficient for interns to review transcripts or listen to recordings to identify themes.
- **Deliverable 3:** Integration of themes across the two groups (males, Title X partners).

**Objective 3:** Communicate findings and recommendations to Tennessee's Title X Family Planning Program.

**Activity 1:** Work with TN Title X Family Planning team to develop a final report utilizing preferred method(s) (e.g., presentation, written report, material) for communication of findings and recommendations.

- **Deliverable 1:** Synthesis of findings and recommendations in a final report or presentation.

### **Skills required for the project(s):**

Microsoft Excel

Microsoft PowerPoint

Program Evaluation

Literature Review Skills

Qualitative Methods (Implementation) (includes key informant interviews, focus groups, photovoice, etc.)

Qualitative Methods (Analysis)

Facilitation Skills

Synthesis of Information

Communication Skills

Presentation Skills

Social Media Skills

Survey Development

### **Required Technology:**

Need for agency-specific emails, Access to agency level folders and networks, Competence in Microsoft Teams, Notification needed prior to internship if state computer is needed.

### **Preferred Internship Work Setting (Remote/In-Person/Hybrid):**

Unsure (Please explain) -- Day-to-day will occur in a virtual work setting. However, due to the nature of this work, preference is for interns to reside within the state of Tennessee to assist with conducting (if male) or supporting (if not male) the in-person focus groups. If this is not possible, we can make other arrangements so that the interns are still

involved with the actual focus group process if that is the method selected to collect qualitative data.

**Does your agency require a contractual agreement (e.g., memoranda of understanding, hiring paperwork, etc.) between a student's academic institution and your agency?**

No

**Is there affordable temporary housing available for the students near your agency?**

Yes

**What is the typical cost of a furnished short-term rental or sublet near your agency?**

\$1100-\$1300/per person

**Is your agency easily accessible by public transportation?**

Yes

**Are services such as Lyft or Uber available near your agency?**

Yes

**Please include 2-3 sources where students may find temporary housing. Examples include listservs or universities close by that may have sublease websites or dormitory housing available. Note: Since the student interns will be likely unfamiliar with the area, if your state is selected as an internship site, the expectation is that you will provide some information to the students to help them identify housing in the area. Also, it is important to recognize that most students will not have cars. As such, recommended housing should be close to public transportation.**

Airbnb - <https://www.airbnb.com/s/Nashville--TN>

Vanderbilt Off Campus Housing - <https://offcampushousing.vanderbilt.edu/>

Apartments.com

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# Texas Department of State Health Services, Community Health Improvement (CHI) Division, Maternal and Child Health Unit

**Location:** Austin, TX

## **Project Description:**

The Texas Department of State Health Services (DSHS) is the state public health agency whose mission is to improve health and well-being in Texas. Help Me Grow (HMG) is an evidence-based system framework that promotes child development by identifying vulnerable children and helping Texas communities leverage existing resources to successfully link families with young children (ages 0-3) to community resources, services, and supports that meet their needs and have the greatest impact on children's optimal development. HMG Texas has nine sites that work to build and strengthen a coordinated system to increase early childhood development surveillance and connect families to the programs, resources, and services they may need through the implementation of four core components: a centralized access point, family and community outreach, child health provider outreach, and data collection and analysis. Since 2020, DSHS has provided administrative oversight, technical assistance, and guidance for HMG Texas as it evolves. As of today, HMG Texas serves 36 Texas counties across nine local systems.

The student interns will work under the HMG Coordinator and jointly synthesize best practices for HMG System Model implementation in all nine HMG Texas local systems. This effort will improve public-facing and interagency understanding of HMG System Model implementation in each HMG Texas supported county. Specifically, the interns will facilitate information collection through key informant interviews (KII) with each HMG Texas local system. The aim of the KII is to gather information on the step-by-step processes each system uses when a family, organization, or provider approaches their HMG Texas system.

After compiling information from HMG Texas affiliates, the interns will synthesize results for each HMG Texas system into a 2-page handout report. They will then communicate these findings to HMG Texas affiliates, stakeholders, and appropriate agency staff. This will include a summary of each HMG Texas local system's best practices for implementation of each core component, lessons learned to improve early childhood systems building, a descriptive visual of how HMG operates in each community, and recommendations. This will assist DSHS in focusing strategic planning efforts on the spread and scaling of HMG Texas and inform the development of a state action plan for improving HMG System Model implementation.

Simultaneously, the interns will assist the HMG Texas team in performing monthly community scans of existing, relevant, and up-to-date early childhood development services, education, resources, supports, and activities available in HMG Texas-supported counties to provide HMG Texas affiliates with information to improve and enhance the HMG System Model in their community. After completing the community scans, with guidance and support from the HMG Texas team, the interns will compile their findings and organize HMG National Center and HMG Texas upcoming events, webinars, and data reporting deadlines to develop the monthly HMG Texas affiliate newsletter for August 2023.

Throughout the project, the interns will become familiar with the organizational structure, functions, and personnel of DSHS's Community Health Improvement (CHI) Division as it relates to HMG Texas. They will have access to support, coaching, and guidance from the supervisor and program staff in regular weekly and strategic planning meetings. Additionally, interns will be oriented to the HMG Texas System Model background and receive access to resources, documents, and data to inform the project. The student interns will follow agency policies and guidelines for the duration of their placement.

Website: <https://www.dshs.texas.gov/mch/HMGTX.shtm>

## **Project connection to Title V agency's priorities:**

Texas' Title V program is operated by the Maternal and Child Health (MCH) Section at DSHS which funds HMG Texas. By

contributing to a larger assessment of each HMG Texas local system’s operations and functions, this project directly supports Texas’ Title V action plan to implement state Strategy 2 for National Performance Measure 6: percent of children, ages 9 through 35 months, who received a developmental screening using a parent-completing screening tool in the past year. Strategy 2 is to lead, fund, and partner on activities and initiatives, such as HMG Texas and “Learn the Signs. Act Early.” to make developmental screening and monitoring tools and information accessible to families. This strategy also serves to address the State Priority Need to improve the cognitive, behavioral, physical, and mental health development of all MCH populations.

**Describe how the proposed project(s) center(s) equity:**

HMG Texas is available to all Texan families in HMG-served counties with a focus on reaching, serving, and advocating on behalf of families who experience disparities in access to support, services, and resources. Furthermore, HMG Texas seeks diverse and culturally competent early childhood providers, stakeholders, and/or subject matter experts/technical advisors to serve on the HMG Texas Steering Committee and provide guidance and feedback on ways to reduce health disparities through HMG Texas initiatives. Through this project, the interns will work directly with HMG Texas affiliates who implement the following strategies to reduce health disparities in their communities:

- Development of materials (both verbal and written) in languages beyond English and Spanish;
- Promotion and dissemination of developmental screeners in languages beyond English and Spanish;
- Creation of formal HMG staff positions filled by parent leaders or community members from underrepresented populations; and,
- Collection of disaggregated data to identify which families and populations are served by HMG to guide targeted outreach strategies.

As part of the key informant interview process, the interns will identify and report on best practices to address health disparities within HMG System Model implementation.

**Project Objectives/Activities/Deliverables:**

**Objective 1:** Perform one community scan of existing, relevant, and up-to-date early childhood development services, education, resources, supports, and activities available in HMG Texas-supported counties that can inform HMG Texas affiliates’ continuous quality improvement efforts.

**Activity 1:** The interns will assist HMG Texas staff in creating and disseminating the August 2023 HMG Texas affiliate newsletter by first becoming familiar with the implementation of the HMG System Model and its four components from a national, state, and local perspective. Students will research and gather appropriate, relevant and up-to-date early childhood development research, literature, services, activities, system-building toolkits, upcoming webinars, etc. to inform and support HMG Texas affiliates’ implementation efforts in their community. Additionally, the interns will compile and organize HMG National Center and DSHS’s upcoming program-specific events, webinars, and data reporting deadlines to include in the monthly HMG Texas affiliate newsletter, as well as, identify one HMG Texas local system to spotlight in the monthly newsletter.

- **Deliverable 1:** Monthly HMG Texas affiliate newsletter for August 2023.

**Objective 2:** Research and collect information from all HMG Texas local systems about their community-based HMG implementation strategies, best practices, step-by-step operations, and functions for each HMG core component.

**Activity 1:** The interns will work with the HMG Texas team to conduct, record, transcribe, and analyze data from key informant interviews recordings and notes with HMG Texas affiliates about the following: how their system functions for families, providers, and partners; the step-by-step processes used to implement HMG core components; benefits to their local communities; barriers; etc.

- **Deliverable 1:** Development of key informant interview guide.
- **Deliverable 2:** Conduct key informant Interviews (at least one in each of the nine systems).

- **Deliverable 3:** Transcription and simple analysis (e.g., EXCEL) of key informant interviews to develop best practices across the nine sites.

**Activity 2:** The intern will create 2-page handouts summarizing each HMG Texas local systems’ process for all 4 HMG core components, explaining and illustrating how these are implemented in real-time.

- **Deliverable 4:** Intern-developed 2-page handout for each HMG Texas system summarizing findings, including visuals about how the HMG system operates for families, providers, and partners.

**Objective 3:** Develop recommendations across the nine HMG systems in TX based on the best practices generated above and present recommendations to support the spread and scaling of HMG Texas to the DSHS MCH Unit and Child and Adolescent Health Branch teams by August 2023.

**Activity 1:** The interns’ effort will culminate with the development of recommendations across HMG systems and the presentation of findings and recommendations to the DSHS MCH Unit and Child and Adolescent Health Branch teams by August 2023.

- **Deliverable 1:** Develop recommendations across the nine HMG systems to inform the creation of a HMG Texas action plan.
- **Deliverable 2:** Final presentation.

**Skills required for the project(s):**

- Microsoft Excel
- Microsoft PowerPoint
- Literature Review Skills
- Qualitative Methods (Implementation) (includes key informant interviews, focus groups, photovoice, etc.)
- Qualitative Methods (simple analysis)
- Communication Skills
- Presentation Skills
- Survey Development

**Required Technology:**

Interns will receive access to agency-level folders and networks. Interns will understand the importance of government informational privacy details and operate under agency acceptable use agreements. Interns should be competent in Microsoft Teams and office products. Intern may also need an agency-specific email.

**Preferred Internship Work Setting (Remote/In-Person/Hybrid):**

No Preference

**Does your agency require a contractual agreement (e.g., memoranda of understanding, hiring paperwork, etc.) between a student’s academic institution and your agency?**

Not sure

**Is there affordable temporary housing available for the students near your agency?**

Yes

**What is the typical cost of a furnished short-term rental or sublet near your agency?**

Above \$1301/per person

**Is your agency easily accessible by public transportation?**

Yes

**Are services such as Lyft or Uber available near your agency?**

Yes

**Please include 2-3 sources where students may find temporary housing. Examples include listservs or universities close by that may have sublease websites or dormitory housing available. Note: Since the student interns will be likely unfamiliar with the area, if your state is selected as an internship site, the expectation is that you will provide some information to the students to help them identify housing in the area. Also, it is important to recognize that most students will not have cars. As such, recommended housing should be close to public transportation.**

Sublease listservs and chat groups. The University of Texas may have housing options and is 7-minutes from the agency.

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# Utah Department of Health and Human Services, Family Health Division, Office of Maternal and Child Health

**Location:** Salt Lake City, UT

## **Project Description:**

This project will focus on mapping future strategies of the Utah Women and Newborns Quality Collaborative (UWNQC) (Utah's Perinatal Quality Collaborative) by measuring member satisfaction, mapping the UWNQC's partner landscape, assessing faith-based community initiatives, developing strategies beyond hospitals (e.g., outpatient clinic engagement) and increasing focus on the social determinants of health. The UWNQC is a statewide network of professionals, hospitals and clinics dedicated to improving the health outcomes for Utah women and babies. Since 2013, the Collaborative has worked with clinical systems statewide to implement various Quality Improvement projects. The Collaborative does this by using evidence-based practice guidelines and quality improvement processes. UWNQC resides in the Utah Department of Health and Human Services (Department), in the Family Health Division under Maternal and Child Health.

The ten-year anniversary of UWNQC is in 2023 and we want the voice of the customer to help frame future quality improvement initiatives. The project will include mapping the UWNQC's partner landscape and conducting a needs assessment/gap analysis. These activities will help to identify UWNQC areas of strength and opportunities for improvement. Exploring ways to engage the health care delivery system beyond hospitals will expand UWNQC's reach. Developing a plan to involve faith-based communities includes creating educational resources in areas such as Maternal Mental Health.

Minority women in Utah experience health disparities in maternal mortality and morbidity which are complex and multifaceted, affected by economic, social-cultural and environmental conditions (*Office of Health Disparities (2021). A Utah Health Disparities Profile: Maternal Mortality and Morbidity among Utah Minority Women. Salt Lake City, UT: Utah Department of Health*).

Understanding social determinants of health (SDOH) by using the Utah Healthy Places Index and creating a SDOH toolkit for specific populations at high risk of maternal morbidity and mortality provides a community resource that can be shared statewide.

## **Project connection to Title V agency's priorities:**

This project links to various Utah Title V action plan activities including those aimed at reducing maternal mortality and morbidity and addressing Health Equity. The Utah Women and Newborns Quality Collaborative addresses various maternal and infant health outcomes through quality improvement projects. Creating a plan for engagement beyond hospitals expands the reach of UWNQC since the primary focus has been to work with hospitals on projects. Other areas that we are looking to explore include using a faith-based initiatives coordinator to share resources/discuss maternal health topics in their community. Understanding and addressing social determinants of health are also key Title V priorities.

## **Describe how the proposed project(s) center(s) equity:**

Equity is incorporated into the project in various ways, including assessing Social Determinants of Health and using the Utah Healthy Places Index (HPI) to inform potential areas for maternal health projects. The Utah HPI is a tool developed by the Utah Department of Health and Human Services in partnership with the Public Health Alliance of Southern California to advance health equity through open and accessible data. The Utah HPI combines 20 community characteristics, like access to healthcare, housing, education, and more, into a single indexed HPI score. Each HPI indicator is linked to a Policy Action Guide, which highlights equitable solutions to improving community health. The tool offers filters, including race and geography, which help to identify health inequities. Expanding outreach to faith-based communities and outpatient clinics including Community Health Centers and Federally Qualified Health Centers are

other ways the project has an equity-centered lens.

### **Project Objectives/Activities/Deliverables:**

**Objective 1:** Develop, conduct, and analyze a Utah Women and Newborns Quality Collaborative (UWNQC) satisfaction survey; create a partner map; develop partner and non-hospital engagement plan; and, develop a communication plan and outpatient master contact list for the UWNQC 10 year anniversary.

**Activity 1:** Develop member satisfaction survey and assess satisfaction with UWNQC among partners.

- **Deliverable 1** Create, administer, and analyze survey results; conduct gap analysis based on the survey results and develop recommendations based on identified gaps.

**Activity 2:** Develop map of UWNQC's partner landscape and conduct analysis of this information.

- **Deliverable 2:** Map and analysis of UWNQC's partner landscape.

**Activity 3:** Develop partner communication and non-hospital engagement plan.

- **Deliverable 3:** Non-Hospital Partner communication and engagement plan.

**Objective 2:** Create a roadmap for the future work of a faith-based community initiatives coordinator including reviewing best practices for engaging the faith-based community, assessing the landscape, gathering resources, and developing an implementation plan for engaging the faith-based community on maternal health issues.

**Activity 1:** Faith-Based community assessment. Review best practices on engaging faith-based communities on maternal health and related issues and identify contacts at faith-based organizations in Utah.

- **Deliverable 1:** Summary of best practices for engaging the faith-based community on maternal health issues.

**Activity 2:** Compile resources for addressing Maternal Mental Health (MMH) within the faith-based community.

- **Deliverable 2:** Compilation of Resources for MMH aimed at the faith-based community.

**Activity 3:** Develop plan for training faith-based communities on Maternal Mental Health.

- **Deliverable 3:** Implementation plan for training faith-based communities on Maternal Mental health.

**Objective 3:** Review already collected Utah Social Determinants of Health (SDOH) data, identify key gaps, and create a SDOH toolkit for one identified disproportionately affected population with respect to maternal health issues.

**Activity 1:** Review Utah SDOH data and identify and select one disproportionately affected population with respect to maternal health.

- **Deliverable 1** Identification and selection of one disproportionately affected population with respect to maternal health based on the SDOH analysis.

**Activity 2:** Identify key gaps for the one selected Utah population with respect to issues of maternal health.

- **Deliverable 2:** Summary of key gaps for the one selected Utah population disproportionately affected by issues related to maternal health.

**Activity 3:** Develop maternal health resource toolkit focused on SDOH for the selected population based on the gap analysis.

- **Deliverable 3:** SDOH toolkit focused on the particular gaps with respect to maternal health issues faced by the one selected population.

### **Skills required for the project(s):**

Microsoft Excel

Microsoft PowerPoint

Program Planning

Literature Review Skills

Community Assessment

Qualitative Methods (Simple data collection --may include key informant interviews, focus groups, photovoice, etc.)

Qualitative Methods (Simple Analysis)

Facilitation Skills

Synthesis of Information

Communication Skills

Presentation Skills

Survey Development

**Required Technology:**

Personal computer with access to the internet.

**Preferred Internship Work Setting (Remote/In-Person/Hybrid):**

Remote

**Does your agency require a contractual agreement (e.g., memoranda of understanding, hiring paperwork, etc.) between a student's academic institution and your agency?**

Not sure

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## Vermont Department of Health, Division of Maternal and Child Health

**Location:** Burlington, VT

### **Project Description:**

The student interns will jointly contribute to planning and conducting a formative assessment of maternal and child health needs in the state of Vermont. This work is designed to inform the larger Title V needs assessment. The interns will assist in scoping community engagement efforts among minority populations in Vermont, specifically New American, African American, and Indigenous populations. The interns will gather publicly available information to map community engagement opportunities to inform outreach and recruitment. Additionally, interns will contribute to focus group and listening session design including outreach materials, discussion questions, and protocol for analyses. If the focus group and listening sessions are conducted during the summer, interns will participate in data cleaning and simple data analysis (e.g., EXCEL), synthesis of results, and contribute to recommendation development. The interns themselves will not be required to conduct any sophisticated analyses. This work is situated to set the groundwork for the larger needs assessment as part of Title V deliverables. This formative evaluation will be made available to all partners and contractors to inform the larger body of work associated with the Title V to center the needs of minority populations in the state.

### **Project connection to Title V agency's priorities:**

Vermont finalized our State Health Assessment and State Health Improvement Plan (SHA/SHIP), which helps us prioritize goals and objectives for health, monitor trends, identify gaps and track progress. The SHA/SHIP uses a health equity framework, evaluating MCH data by key populations that have experienced historical injustice. Vermont's 2020 Title V Needs Assessment identified assessment of the needs of minority populations as a targeted priority for future years. Additionally, health equity is a Department-wide key priority area as identified within SHA/SHIP. It is our intent to highlight the needs of marginalized populations in a more robust and comprehensive manner than in past Title V needs assessments. This work is one of many foundational steps that Vermont Title V/MCH is embarking on to achieve health equity. This project is aligned with Title V's crosscutting priority area of promoting an approach to work that is integrated, strength-based, and mission-driven. Engaging with communities, particularly those who often do not have a voice, is critical to ensure that resources and policy are supporting those who need them most.

### **Describe how the proposed project(s) center(s) equity:**

Vermont's Department of Health, and especially Title V/MCH, has an ongoing commitment to health equity and family engagement. As noted in Vermont's Title V Block Grant Application 2023, health equity and eliminating disparities is a crosscutting priority area. This project is designed to increase capacity for evaluating the needs of marginalized communities and to equitably and comprehensively illustrate the needs of Vermonters who are historically disadvantaged. This work will provide clear direction for our overall Title V needs assessment and strategic planning for Title V in addition to other programmatic areas within MCH.

### **Project Objectives/Activities/Deliverables:**

**Objective 1:** Develop a plan for assessing the needs of minority populations in VT.

**Activity 1:** Interns will review best practice standards for community engaged assessment and consult with relevant Program Managers, partners, and subject matter experts on these practices.

- **Deliverable 1:** Based on the information collected develop a spreadsheet of best-practices for community based needs assessment.

**Activity 2:** Interns will develop a plan to conduct a community-based needs assessment to include focus group guides, key informant interview scripts, interview materials, and data collection protocols.

- **Deliverable 2:** Drafts of relevant materials as listed above.

**Objective 2:** Assist in outreach and facilitation of community-based assessment.

**Activity 1:** Coordinate meeting details and organize data collection materials.

- **Deliverable 1:** Documentation of conduct of focus groups, key informant interviews, and listening sessions.

**Objective 3:** Assist in data cleaning and analysis of qualitative information collected.

**Activity 1:** Organize data into the appropriate format (using software such as EXCEL).

- **Deliverable 1:** Cleaned and “coded”/“organized” dataset ready for analysis.

**Activity 2:** Analyze the data for themes that reflect community needs to inform priority areas

- **Deliverable 2:** Draft of a report based on the findings from the analyses.

**Skills required for the project(s):**

Microsoft Excel

Literature Review Skills

Community Assessment

Qualitative Methods (Implementation) (includes key informant interviews, focus groups, photovoice, etc.)

Qualitative Methods (Simple Analysis)

Synthesis of Information

Communication Skills

**Required Technology:**

Agency-specific emails, competence in Microsoft Teams

**Preferred Internship Work Setting (Remote/In-Person/Hybrid):**

No Preference

**Does your agency require a contractual agreement (e.g., memoranda of understanding, hiring paperwork, etc.) between a student’s academic institution and your agency?**

No, we have not needed them in the past.

**Is there affordable temporary housing available for the students near your agency?**

There is no readily available affordable housing unless they have a personal connection or network.

**What is the typical cost of a furnished short-term rental or sublet near your agency?**

\$1100-\$1300/per person

**Is your agency easily accessible by public transportation?**

Yes

**Are services such as Lyft or Uber available near your agency?**

Yes

**Please include 2-3 sources where students may find temporary housing. Examples include listservs or universities close by that may have sublease websites or dormitory housing available. Note: Since the student interns will be likely unfamiliar with the area, if your state is selected as an internship site, the expectation is that you will provide some information to the students to help them identify housing in the**

**area. Also, it is important to recognize that most students will not have cars. As such, recommended housing should be close to public transportation.**

Seven Days, Front Porch Forum, University of VT, word of mouth, realtors. We are in a housing crisis right now so housing might be difficult unless they have pre-established connections or options. All work can be done remotely; however, we are happy to accommodate in-person work.

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**Location:** Richmond, VA

### **Project Description:**

BabyCare is a care coordination/care case management program conducted through home visits by nurses. BabyCare, in its current form, is not standardized across Virginia's local health districts (LHDs), with some districts fully providing all of BabyCare's services, some providing parts but not all, and others not participating if there are no maternity services offered. Virginia Medicaid (DMAS) provides reimbursement for BabyCare activities, and the BabyCare program is a part of the Title V/DMAS MOU. Currently, there are eight LHDs providing BabyCare services. Each one follows their own individual internal processes regarding data collection and program metrics. Currently, existing metrics are not aggregated collectively to understand the programmatic impact statewide, aligned in any way with available Medicaid data, informing additional programmatic planning and support, or complementing any upstream Title V initiatives. The Summer 2023 Interns will conduct evaluations of each of the eight BabyCare programs. Specifically, they will review each program's existing BabyCare program data collection methods, identifying common and unique metrics across the programs. They will then work with the MCH epidemiology team to design a standardized tool, and work to develop reports that will demonstrate BabyCare's impact in addressing a number of Title V priorities. The interns will meet regularly with Title V Leadership and DMAS BabyCare/MCH Team regarding the development of this product. Finally, the Summer Interns will present their work via PowerPoint to Title V, DMAS and LHD Leadership, as well as lead a training to the eight BabyCare programs on new data collection tool.

### **Project connection to Title V agency's priorities:**

Virginia's Title V 2020 Needs Assessment identified racial disparities in maternal and infant mortality as a priority need. This aligns with the Governor's Summer 2021 Maternal Health Strategic Plan, in which a goal was set to eliminate the disparity between black/white maternal and infant mortality rates by 2025.

### **Describe how the proposed project(s) center(s) equity:**

Previous research on Chesapeake's BabyCare program has demonstrated measurable benefit for the participating mothers and children, resulting in a reduction of racial disparities in maternal morbidity/mortality and infant mortality in that district, fewer infants born with low birthweight, higher initiation and sustained breastfeeding, and increased adaption of safe sleep methods. It is important to demonstrate the impact of this program in all districts, and the overall impact on the state's outcome metrics (aligned with national benchmarks).

### **Project Objectives/Activities/Deliverables:**

**Objective 1:** Conduct assessment of eight BabyCare programs' data collection and management methods.

**Activity 1:** To accomplish this assessment, the interns will conduct interviews with the eight BabyCare teams regarding their processes for collecting metrics and assess any internal reporting processes that are in existence.

- **Deliverable 1:** Development of an interview guide which focuses on BabyCare Programs reporting and data collection methods.
- **Deliverable 2:** Conduct interviews with eight BabyCare program coordinators/directors and collect any relevant documents related to each site's data collection and reporting.
- **Deliverable 3:** Conduct simple analysis (e.g., using EXCEL) of eight interviews using transcripts of recordings, and notes taken during the interviews.

**Objective 2:** Based on the interview process and documents shared by the BabyCare Programs, Identify similar and unique metrics across the eight BabyCare programs. Assess missing important metrics needed. Aggregate the data collection methods and metrics into one centralized database.

**Activity 1:** The interns will work closely with the MCH epi team to assess and aggregate the findings with respect to data collection methods and metrics.

**Activity 2:** The interns will then work with the MCH epi team to design a standardized reporting and data collection tool in REDCap to be used across all BabyCare programs going forward to ensure that all necessary metrics are being collected.

- **Deliverable 1:** Completion of standardized REDCap Reporting and Data Collection Tool which includes all necessary metrics.

**Objective 3:** Present final product to VDH MCH/Title V and LDH Leadership, and DMAS MCH Leadership, as well as develop a training presentation for the BabyCare teams at conclusion of internship.

**Activity 1:** Presentation of the standardized REDCap Reporting and Data Collection Tool and key findings to the Leadership teams at VDH and DMAS.

- **Deliverable 1:** Presentation of Final version of the Reporting and Data Collection Tool to Leadership teams.

**Activity 2:** Provide a 1-hour training to the BabyCare programs regarding data entry and utilization of the new standardized Reporting and Data Collection tool.

- **Deliverable 2** Training of BabyCare program personnel on use of the standardized Reporting and Data Collection tool.

**Skills required for the project(s):**

Microsoft Excel

Microsoft PowerPoint

Program Evaluation

Qualitative Methods (Implementation) (includes key informant interviews, focus groups, photovoice, etc.)

Qualitative Methods (Simple Analysis)

Synthesis of Information

Communication Skills

Presentation Skills

Other, Please specify: -- RedCap, Tableau

**Required Technology:**

Microsoft Teams, Zoom

**Preferred Internship Work Setting (Remote/In-Person/Hybrid):**

Remote

**Does your agency require a contractual agreement (e.g., memoranda of understanding, hiring paperwork, etc.) between a student's academic institution and your agency?**

No

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**Location:** Madison, WI

### **Project Description:**

Wisconsin's Title V team has been working over the last several years to increase their partners' ability to use and leverage data. One facet of the Wisconsin Title V program's data collection includes collecting information from the local and tribal health agencies throughout the state that use their funding to support various maternal and child health-focused projects. While the Title V program uses this data internally to inform programmatic decision-making, we would like to develop a plan to make that data publicly accessible and usable – especially for the local and tribal health agencies providing the information – so that partners can use it to inform their decision-making and project planning processes as well.

Students will review the information currently collected by the Wisconsin Title V program from local and tribal health agencies and create a template for a quarterly data summary and/or a data analysis plan that synthesizes data these agencies are reporting. The Title V program plans to use the template developed to share data gathered from all local and tribal health agencies with these agencies on a quarterly basis so they can use and leverage that information in their planning and decision-making processes.

Additionally, the students will receive a compilation of data related to social connections and social isolation's effect on mental health. Students will review the data and work closely with Wisconsin's Title V Epidemiologist and Evaluator to develop a data analysis plan which we anticipate will involve primarily qualitative data analysis. Students will implement their data analysis plan and prepare a "State of Social Connectedness in Wisconsin" report. The report will provide key findings as well as recommendations for future data collection to address gaps in current data collection and will be shared with the Title V program.

Finally, students will use their key findings report to create a one-page summary or infographic based on the "State of Social Connectedness in Wisconsin" report for the Wisconsin Title V program to present to partners and the public (in a format accessible and understandable to a variety of audiences. Depending on findings and student capacity, multiple one-pagers or infographics could be developed.

### **Project connection to Title V agency's priorities:**

Data transparency and accessibility

This project will largely support Wisconsin's state performance measure focused on improving social connections for families in Wisconsin. During the November 2022 HRSA Block Grant Review, HRSA staff encouraged Wisconsin to focus on foundational aspects of this novel focus area to allow the team to gain a clearer focus/trajectory in the coming year. The proposed projects would support Wisconsin's Title V team in achieving that objective. The data analysis and subsequent recommendations would affect all the other performance measures as well, demonstrating in an evidence-informed way how important social connections are across all areas of Title V. Additionally, the project focused on developing a quarterly data report template would improve evidence-informed decision making for all local and tribal health agencies who receive Title V funding.

### **Describe how the proposed project(s) center(s) equity:**

Prior to 2020, it was clear that social connectedness and social isolation had an impact on mental health. Exacerbated by the COVID-19 pandemic, social interactions with others have become more limited than ever, and overall mental health has been declining. We also know that a lack of strong social connection increases inequities. For example, social connections are predictive of mortality and cardiovascular disease, and play an equally protective role against the incidence and progression of cardiovascular disease.

The proposed project would elevate those data, bringing them into focus and allowing the state and funded partners to use and leverage that information to embed social supports into their current projects. This would undoubtedly include projects focused on supporting people who have been historically underserved and underrepresented. Mental, physical,

and social health are interconnected and need to be addressed simultaneously; having a clear presentation of the evidence that supports this is vital to making informed and equitable decisions.

In 2022, the Wisconsin Title V program revised their funding distribution process to ensure that equity is at the center of each step in the funding process. This effort led to 12 community-based organizations being offered funding for 2023 – a significant increase from the 3 community-based organizations who received Title V funding in 2022. The proposed projects in this application would benefit all the organizations funded by the Wisconsin Title V program, and especially support the work of newer, community-rooted organizations receiving Title V funding, and provide evidence to encourage partners to engage with their communities, and advocate for policies that make social connection more accessible.

### **Project Objectives/Activities/Deliverables:**

**Objective 1:** Students will develop a template for sharing quarterly data updates submitted by local and tribal health agencies who are working to improve social connections in the MCH population in their communities.

**Activity 1:** Students will meet with the Title V Epidemiologist and Evaluator to learn about the types of information currently being collected from local and tribal health agencies who are using their funding from the Title V program to support social connections in their communities. Students will research and compile a list of data reports from other sources and assemble a list of “dos” and “don'ts” they recommend for the template. Based on review of the data being collected and their research into existing data reports used by other organizations, students will also identify data visualization tools to utilize within the reports. Students will finally develop and propose a draft template(s) for the Title V program to use, based on the work they have done and the information they have learned.

- **Deliverable 1:** Template document for the Wisconsin Title V team to use to compile and send quarterly data reports to LTHDs (generic or focused on social connectedness?)

**Objective 2:** Students will analyze data provided by the WI TV program related to social connections and summarize their findings.

**Activity 1:** Students will receive data compiled by the Wisconsin Title V team related to social connection. They will review the data and meet with the Title V Epidemiologist/ Evaluator and/or other Title V data staff to agree on a data analysis approach. We anticipate that data analysis will focus mainly on utilizing qualitative analysis techniques. Some quantitative data analysis needs may be identified based on discussions with the Title V data team and the students' recommendation. Students will meet regularly with the Title V Epidemiologist/Evaluator throughout their data analysis and will use their analyses to develop a report summarizing key findings.

- **Deliverable 1:** Report summarizing key findings from data analysis on the “State of Social Connectedness in Wisconsin.”

**Objective 3:** Students will develop a brief messaging document on the “State of Social Connectedness in Wisconsin” based on the report developed in Objective 2.

**Activity 1:** Students will review the key findings report developed in Objective 2 and use it to create a one-page summary or infographic for the Wisconsin Title V program to present to the partners and the public (in a format accessible and understandable to a variety of audiences. Depending on findings and student capacity, multiple one-pagers or infographics could be developed.

- **Deliverable 1** One-pager or infographic displaying key findings of data analysis from the “State of Social Connectedness in Wisconsin”.

### **Skills required for the project(s):**

Program Planning

Literature Review Skills

Qualitative Methods (Implementation and Analysis)

Quantitative analysis skills

Synthesis of Information  
Communication Skills

**Required Technology:**

Competence in Zoom/MS Teams

Experience with qualitative data analysis techniques; familiarity with thematic and/or content analysis.

Experience with basic quantitative data analysis techniques.

**Preferred Internship Work Setting (Remote/In-Person/Hybrid):**

No Preference

**Does your agency require a contractual agreement (e.g., memoranda of understanding, hiring paperwork, etc.) between a student's academic institution and your agency?**

No

**Is there affordable temporary housing available for the students near your agency?**

Yes

**What is the typical cost of a furnished short-term rental or sublet near your agency?**

\$701-\$900/per person

**Is your agency easily accessible by public transportation?**

Yes

**Are services such as Lyft or Uber available near your agency?**

Yes

**Please include 2-3 sources where students may find temporary housing. Examples include listservs or universities close by that may have sublease websites or dormitory housing available. Note: Since the student interns will be likely unfamiliar with the area, if your state is selected as an internship site, the expectation is that you will provide some information to the students to help them identify housing in the area. Also, it is important to recognize that most students will not have cars. As such, recommended housing should be close to public transportation.**

Uwsublets.com and Campusareahousing.wisc.edu are common places students go to find temporary housing. Also, temporary housing can range from \$500-\$1000, depending on whether the person is looking for a room or an entire unit.

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# Wyoming Department of Health, Public Health Division, Maternal and Child Health Unit

**Location:** Cheyenne, WY

## **Project Description:**

In 2023, the Title V MCH Internship students will research evidence-based strategies to increase tobacco cessation during pregnancy in rural and frontier settings. Based on the 2020 needs assessment, tobacco use during pregnancy and the postpartum period was seen as a need to be addressed in the state of Wyoming. After collecting this information, the students will synthesize the results and present them to the Women and Infant Health Program for feedback. The student interns will then select one to two of the strategies, create an implementation plan for those strategies, and then present those plans to the Maternal and Child Health Unit and to the Substance Use and Tobacco Program. This project will help to provide strategies that the Wyoming Maternal and Child Health Unit and collaborating partners can use to implement tobacco cessation programming around the state.

## **Project connection to Title V agency's priorities:**

This project supports Wyoming's Title V Action Plan State Performance Measure 1: Percent of women who smoke during pregnancy. The objective is to promote the importance of smoking cessation among women of reproductive age, pregnant/postpartum women, and to implement evidence-based activities to address barriers to smoking cessation.

## **Describe how the proposed project(s) center(s) equity:**

As Wyoming is a frontier state, there is more difficulty in trying to implement programmatic efforts to tackle tobacco use during pregnancy. Most recommended and evidence-based programming for tobacco cessation has been developed for individuals residing in urban areas. Those living in frontier areas (defined as fewer than 6 people per square mile) do not always have adequate access. Forty-seven percent of people living in Wyoming live in frontier areas of the state. Further, 17 out of 23 counties in Wyoming are considered frontier. This results in limited access to healthcare resources and support services for individuals who live in these areas, and in particular, access to services for tobacco cessation. This project will involve identifying evidence-based strategies and creating an implementation plan to target pregnant and postpartum women in rural and frontier areas across the state to ensure they have access to support services for tobacco cessation.

## **Project Objectives/Activities/Deliverables:**

**Objective 1:** Compile evidence-based strategies focused on programs for tobacco cessation during pregnancy and postpartum in rural and frontier settings.

**Activity 1:** Weeks 1-4: Activity 1: General Orientation: The initial task of the student interns will be to become familiar with the organizational structure, function, and personnel of the Maternal and Child Health Unit, the Public Health Division, and the Wyoming Department of Health. General Orientation will include a familiarization with the landscape of women's health in Wyoming. Meetings will be arranged to orient the student interns about Wyoming's Title V MCH priorities.

**Activity 2:** Weeks 1-4: Activity 2: Project Orientation: Meetings will be held to transfer the knowledge and previous programmatic work on tobacco cessation to the student interns. Student interns will receive more guidance on the project objectives, the project goal, important stakeholders to interview, and best practices to guide their research on evidence-based strategies.

**Activity 3:** Weeks 1-4: Activity 3: Research on Evidence-based Strategies: Student interns will research and compile evidence-based strategies on programs for tobacco cessation during pregnancy and postpartum into a repository for later synthesis of information.

**Activity 4:** Weeks 1-4: Activity 4: Student interns will develop an interview guide and conduct key informant interviews with stakeholders, with up to two stakeholders that will be identified by the student interns themselves.

- **Deliverable 1a:** Repository of evidence-based strategies of programs on tobacco cessation during pregnancy and postpartum in rural and frontier settings.
- **Deliverable 1b:** Key informant interview guide developed and up to 10 KII conducted.

**Objective 2:** Analyze and identify evidence-based strategies that align with the project objectives and present these strategies to the Women and Infant Health Program for feedback.

**Activity 1:** Weeks 5-6: Activity 6: Analysis and Synthesis of Information: Student interns will review the created repository of evidence-based strategies and information gathered during the key informant interviews with stakeholders. Students will conduct a simple analysis of the strategies and the applicability of those strategies to Wyoming using criteria developed by the students in collaboration with their preceptor. The criteria should include dimensions such as feasibility, cost, and applicability for implementation of each evidence-based strategy in a rural area.

**Activity 2:** Weeks 5-6: Activity 7: Develop and present a summary with regard to the applicability of the selected strategies. Student interns will develop a presentation on the applicability of the identified strategies and present to the Women and Infant Health Program and other relevant stakeholders for feedback and guidance.

- **Deliverable 1:** Presentation on the applicability of potential evidence-based strategies on focused on tobacco cessation during pregnancy for rural areas.

**Activity 3:** Weeks 1-10: Activity 5: Ongoing Mentorship and project guidance: Student interns will meet regularly with preceptor and other mentors and stakeholders for ongoing mentorship, and updates, feedback, and guidance related to the project objectives and project goal.

**Objective 3:** Develop an implementation plan of selected evidence-based strategies based on feedback from the presentation to the Women and Infant Health Program of one to two identified strategies and present this plan to the Maternal and Child Health Unit and the Substance Abuse and Tobacco Program.

**Activity 1:** Weeks 7-9: Activity 8: Develop Implementation Plan: Student interns will identify one to two identified evidence-based strategies that are applicable to Wyoming, and then develop a draft implementation plan for those strategies. Feedback and guidance will be provided to the student interns as they develop their plan.

**Activity 2:** Week 10: Activity 9: Present Implementation Plan: Student interns will present draft implementation plan to the Maternal and Child Health Unit and the Substance Abuse and Tobacco Program.

- **Deliverable 3** Final presentation of implementation plan to Maternal and Child Health Unit and the Substance Use and Tobacco Program.

### **Skills required for the project(s):**

Literature Review Skills

Qualitative Methods (Implementation) (includes key informant interviews)

Qualitative Methods (Simple Analysis)

Facilitation Skills

Synthesis of Information

Communication Skills

Presentation Skills

### **Required Technology:**

The student interns will need agency-specific emails, access to agency level folders and networks, and competence in using Google Suite.

### **Preferred Internship Work Setting (Remote/In-Person/Hybrid):**

Remote

**Does your agency require a contractual agreement (e.g., memoranda of understanding, hiring paperwork, etc.) between a student's academic institution and your agency?**

Yes, the Wyoming Department of Health requires an Affiliation Agreement with the student's institution if one is not already in place.

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