Addressing Racism’s Impact on Infant Mortality: Lessons Learned from The Partnership to Eliminate Disparities in Infant Mortality

July 11, 2013
Webinar
Housekeeping

- Phones will be muted during the webinar.

- If you have a question, please post it via the chat function. Questions will be taken from chat. Submit questions as soon as they come to mind – we’ll keep track of them.

- We will be recording and archiving this webinar.

- Slides and recording will be available at www.everywomansoutheast.org.
Acknowledgements

- Megan Philippi and AMCHP
- The W.K. Kellogg Foundation
- Every Woman Southeast Volunteers
- Our Speakers
What is Every Woman Southeast?

- A coalition of leaders in Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina and Tennessee to build multi-state, multi-layered partnerships to improve the health of women and infants in the Southeast.
The Every Woman Southeast Initiative is a group of leaders and agencies from eight states working together to build a multi-state, multi-layered partnership to improve the health of women and infants in the south.
Mark Your Calendars for our Next Webinar

We are really excited about our upcoming webinar on February 9, 2012 from 12-1:30 est. This webinar will focus on the Life Course Theory. This theory is a conceptual framework that helps explain health and disease patterns - particularly health disparities - across populations and over time. It points to social, economic and environmental factors as underlying causes of persistent inequalities in health. This theory is grounded in social determinants and social equity models and is also a community or "place based" approach. While the concept is innovative and for most public health professionals somewhat intuitive, the application in practice is a lot more complex.

In other words, while many of us may be interested in changing the way we approach our work in maternal and child health, there are not many existing models and programs to refer to as best practice for how to actually make it happen! This means that we need to be the change agents to begin to build these new models. But first, it is helpful to make sure we understand the concept and have guidance as to how some programs have made this happen.

Both of our speakers are national experts on the life course model. Our first speaker is from Florida and will provide us with an overview of this model and some resources and examples for application. Our second speaker is not from the South but is leading a very
It’s Almost Spring

In the Southeast U.S., we are fortunate to begin to see signs of spring in early March. Before long, we’ll have azaleas, cherry blossoms, daffodils, dogwood buds, basketball tournaments, and pollen! I’ve always thought that it would be easier to keep New Year’s Resolutions if we made them in March, when the beautiful weather and longer light practically beg us to put on sneakers and get outside. This month, Every Woman Southeast continues to move forward with a survey to learn more about you, ongoing website updates, and plans are underway for our next webinar on addressing health inequalities. We hope you’ll share this newsletter with your friends. We’d love to hear your comments and have you join our team!

**Featured State: Tennessee**

This month we are featuring two leaders from Tennessee – Dr. Kimberlee Wyche-Etheridge and Ms. Cindy Chafin. In addition to their busy jobs in their state, both Kimberlee and Cindy have been active on the Every Woman Southeast leadership team. We asked them to respond to a series of questions – please check out what they have to say about their work and goals.

- [Cindy’s Interview](#)
- [ Kimberlee’s Interview](#)

For more information about preconception and women’s health work in Tennessee please visit their page on our website – [click here](#).

**Your Opinion, Please**

We would like to know how you receive and share information as well as how you find out about learning opportunities. Please...
Join Your State Team

- We have 9 state teams – one for each state.
- Find your team lead by clicking on your state webpage on our website.
- Contact the lead and connect. This is a great way to link up with the latest resources and opportunities on preconception health.
Today’s Webinar

ADDRESSING RACISM’S IMPACT ON INFANT MORTALITY: LESSONS LEARNED FROM THE PARTNERSHIP TO ELIMINATE DISPARITIES IN INFANT MORTALITY
Why This Topic?

• African American infants are 2.5 times more likely to die before their first birthday than Caucasian infants

• This gap has persisted for decades – even as infant mortality rates have declined

• This gap represents an unequal playing field that is intergenerational and must be closed
Objectives

- Describe the Action Learning Collaborative strategies
- Describe at least 3 lessons learned from the ALC partnership
- Describe at least one actionable next step that their agency or community could take on this issue
Speakers

- **Piia Hanson**, Program Manager, Association of Maternal & Child Health Programs
- **Maureen Gatere**, Public Health Project Coordinator, City MatCH
- **Kenn Harris**, Board of Directors, National Healthy Start Association
Taking the First Steps: Experiences of Eleven Community/State Teams Addressing Racism’s Impact on Infant Mortality

Maureen W. Gatere, CityMatCH
Piia Hanson, Association of Maternal & Child Health Programs
Kenn Harris, National Healthy Start Association
A little about us...
Objectives

• Review the purpose of the Action Learning Collaborative (ALC)
• Describe experiences of the 6 ALC-1 teams and the 5 ALC-2 teams
• Share both the team challenges and recommendations and partner challenges and recommendations
Purpose of PEDIM & ALC

- Collaboration between three organizations: CityMatCH, AMCHP & NHSA
- Funded by the W.K. Kellogg Foundation
- Partnership to Eliminate Disparities in Infant Mortality (PEDIM)
  - Vision Statement:
    - To eliminate racial inequities contributing to infant mortality within U.S. urban areas
- Action Learning Collaborative (ALC)
  - Mission Statement:
    - To increase capacity at community/local/state levels to address the impact of racism on birth outcomes and infant health
Levels of Action

• 18-month ALC intensive training programs for collaboration and policy improvement

• Three levels of action:
  – Level 1: Team-based activities focusing on community & state issues
  – Level 2: Cross-team communication and assistance
  – Level 3: ALC activities to advance urban MCH practice nationally
Partner Responsibilities

• **Technical Assistance**
  – On site meetings
  – All team calls
  – Team-liaison assistance
  – Information Sharing

• **Evaluation**
  – Partnership Self Assessment Test
  – Wilder Collaboration Inventory
  – Process (meeting and speaker evaluations)

• **Dissemination**
  – Publications
  – National Meetings
Team Responsibilities

- Identify and leverage local capacity to advance the work/project
- Create and Implement Strategic Plans
  - Mapping Action Planning Strategies (MAPS) I-VII
- Disseminate their individual projects
WORK OF THE ALC-1 TEAMS

- Los Angeles, California
- Aurora, Colorado
- Pinellas County, Florida
- Columbus, Ohio
- Chicago, Illinois
- Milwaukee, Wisconsin
Training from the People’s Institute for Survival and Beyond and incorporation of ALC work into curriculums for South Los Angeles Health Project, Shields for Families, LAC MCAH and LAC March of Dimes
• Recruited new members and obtained funding from the state.

• Completed Phase I & II of PPOR and conducted CBPR with target population.

• Is now a pilot site for the Preconception Peer Educator (PPE) program developed by the National Office of Minority Health.

• Developed a new media campaign “Girl Have you Heard” to increase public awareness of the need for Preconception/Inter-conception Health

• ALC is now a 501(c)(3) and is actively seeking funding to keep work moving forward.
• Established connections between government, community and educational institutions and developed business case for corporate support and advocacy to address racism and its effects on health disparities.

• The team recently changed its name to better reflect their focus - Addressing Racism Creating Health Equity (ARCHE)

• Developed a Facebook page and are using it to engage more people in their efforts

• Partnered with the YWCA's national "Stand Against Racism" day in April (2011 & 2012)

• Has continued to work with other local organizations to increase community awareness about health disparities
COLUMBUS, OH

- Completed and launched provider DVD, *All Babies Matter: Understanding the Impact of Racism on Infant Mortality*, which was part of the package for OH Federal Officials congressional visit in March, 2012.

- Columbus Public Health provided funding for a part-time MCH Coordinator.

- Organized a statewide conference to build on their efforts to address racism and its impact on birth outcomes.

- Presented the ALC work at the National Association of Black Social Workers 44th Annual Conference in April, 2012

- ALC members participate on the five workgroups of the State’s Collaborative to Prevent Infant Mortality

- The ALC was instrumental in advocating for a stand alone recommendation in the state’s report to address the effects of racism and the impact on infant mortality
Introduced the documentary *Unnatural Causes* to 37 separate groups (approximately 500 people) to launch discussion about racial inequalities in health care.
• ALC developed session for Milwaukee Fatherhood Initiative (MFI) Summit titled “Ready to Die”, focusing on psychological impacts of racism.

• ALC work, emphasizing infant health, was presented at Black Health Coalition’s three day summit

• In conjunction with the Aurora team, this ALC has provided ALC 2 teams with technical assistance via phone conference

• Language from the Milwaukee Fatherhood Initiative was added to the updated purpose statement for the MCH Advisory Committee
Work of the ALC-2 TEAMS

- Boston, Massachusetts
- Fort Worth, Texas
- Michigan State
- New Haven, Connecticut
- New Orleans, Louisiana
Boston, MA

- Developed a mission and vision statement, designed guiding principles and created a strategic plan to lead PEDIM-ALC team members
- Facilitated focus groups with four target audiences: pregnant or parenting teen women, pregnant or parenting adult women, teen fathers and adult fathers.
- Developed a community campaign, “What a Community Can do for a Pregnant Woman,” informed by the dialogues generated during the focus groups.
Fort Worth, TX

- To raise and increase awareness, the Fort Worth team held a community forum where they shared data on the impact of racism on IM.
- The team sponsored a well-attended “Undoing Racism” training for providers and community members.
- With TA from CityMatCH, Fort Worth conducted qualitative research in the form on concept mapping to engage the priority community.
- The ALC activities acted as a catalyst for many community activities that were already in progress.
State of Michigan

- ALC members participated in a survey to determine their previous participation in racial equity workshops
- They participated in workshops and activities that enriched their understanding of racial equity/inequities and the resulting impacts
- They created a toolkits for use by community providers and consumers to foster dialogue around racism, privilege and equity
- Utilized awareness-building tools to improve staff ability to collect reliable data related to race and ethnicity
Using the documentary *Race: The Power of an Illusion* to provide context, the ALC team held a series of lunch talks on race and racism with community partners, stakeholders and providers. This was followed by focus groups with the same to discuss how racism might impact a pregnant woman and her baby.

To ensure that data was available to drive community action, core team members collaborated and completed phase I and II PPOR analysis for both New Haven and CT using a combined 2000-2008 cohort. PPOR aims to better describe the nature of excess feto-infant mortality and identify opportunities for impact.

The Connecticut DPH has highlighted the work of the ALC to DPH staff, staff from other state agencies, CT MCH Advisory Committee, and other statewide partners. The work of the ALC has been a resource to generated ideas for future efforts to address the impact of racism statewide.
New Orleans, LA

- New Orleans ALC wanted to ensure a strong understanding among core partners of the factors associated with IM in New Orleans by analyzing MCH vital records, FIMR and PRAMS data; and considering measures not routinely analyzed that may be helpful.
- Developed a communications strategy that would allow partners to effectively “speak the language” that would be heard by various audiences where opportunities for change exist.
- They assessed local community experience that helped inform how racism impacted health in New Orleans.
Team Challenges

• Choosing the appropriate members for your team
• Achieving cohesiveness as a team
• Navigating through the sensitive topic of race and racism
• Having honest dialogue about “racism”
Team Challenges (cont.)

- Role of local politics
- Identifying strategies for achievable, short-term solutions
- Establishing stable funding to sustain the work
- Team turn over
Team Recommendations

• Do not be afraid to tackle the racism topic
• If possible, seek the support of a political leader in your target community
• Collect data from various sources (e.g. PPOR, FIMR, multi-level community analysis surveys)
• Identify and engage other organizations and stakeholders that are working on similar initiatives
Team Recommendations (cont)

• Ensure support from your organizations leadership and be prepared to respond to colleagues on this work
• Fully engage the community from the beginning
• Inclusion of fathers as a key component in the discussion regarding the impact of racism on birth outcomes
Partner Challenges

• Staff turn over throughout the project
• Budget cuts allowing the opportunity for collaboration and creative thinking
• Short duration for each of the ALCs
• Follow up and follow through has been challenging
• The recent push towards empirical data may sometimes undermine the importance of addressing social determinants of health
Partner Recommendations

- Have a clear vision and mission to guide your work and that you communicate through the project
- This work is very fluid – be willing to accommodate changes as they happen but also ensuring they advance the vision and the mission of the project
- It is not all or nothing – every little achievement that is made counts
- Commend the work by your teams/communities – often, it is above and beyond many other responsibilities
Next Steps

• Disseminate the new *Taking the First Steps* document

• Follow up with ALC-1 and ALC-2 teams

• Presentation at APHA

• Utilize PEDIM-ALC findings to propel the next phase of research and translation on the effects of race and racism
Resources


- Link coming soon
Thank You
Please submit your questions via chat. Feel free to contact speakers after the webinar with any additional questions.
Join us!

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  http://www.surveymonkey.com/s/FQS2P3W

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- Follow the blog: www.everywomansoutheast.com

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- Read our monthly e-newsletter

- Contact Sarah at sarahv@med.unc.edu or 919-843-7865
National Campaign

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A woman's health is her capital.
Harriet Beecher Stowe