



Turning the Ship Toward the Life Course Theory for Equity in Birth Outcomes

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Outline



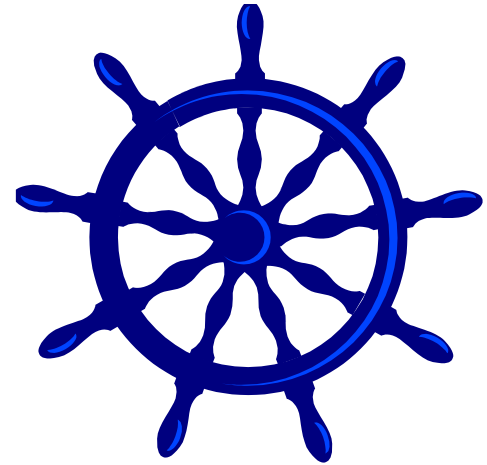
Equity in birth outcomes

- **The Wisconsin story**



Life course theory to action:

- **Improving birth outcomes**
- **Improving women's health**
- **Collaborative Improvement and Innovation Network (CoIIN) to reduce infant mortality**



Equity in Birth Outcomes: **The Wisconsin Story**



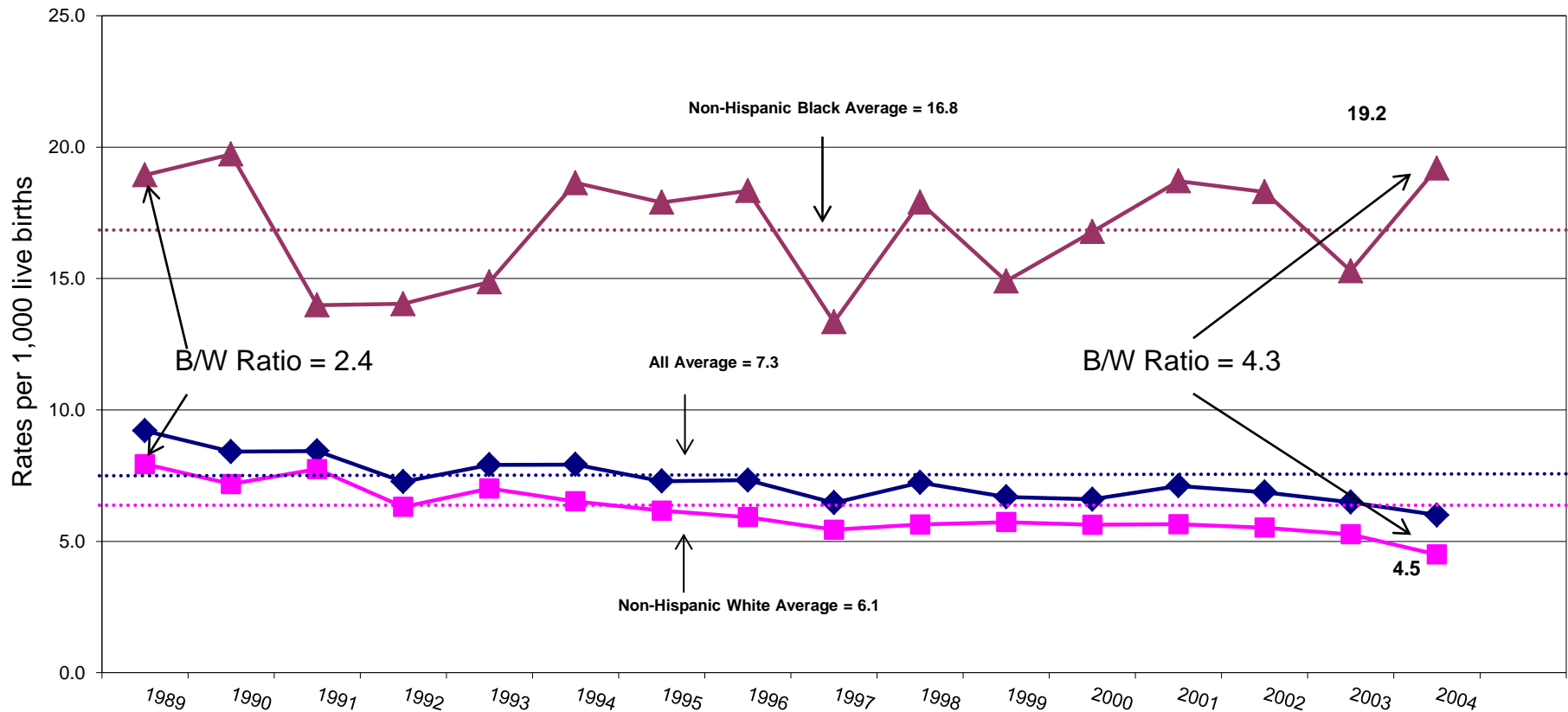
In an average week in Wisconsin...

- 1,280 babies are born.
- 128 babies are born preterm.
African American rate 1.6 times white rate
- 90 babies are born with low birth weight.
African American rate 2.2 times white rate
- 8 babies die before reaching their first birthday.
African American rate 2.7 times white rate

WISH. 2013 counts, 2011–2013 rates (2011–2012 for infant mortality).



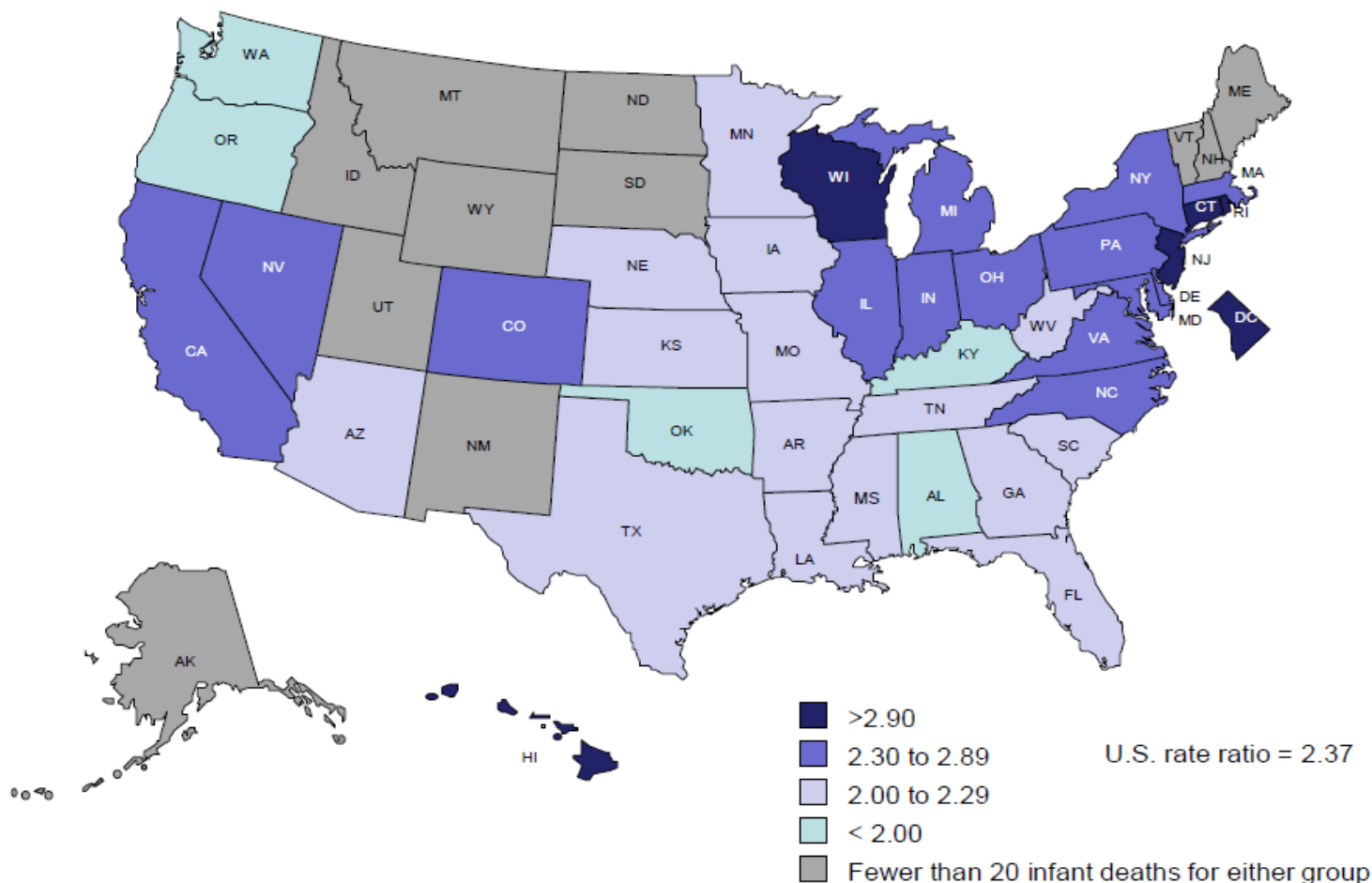
Infant Mortality Rates: Total, White, and African American, Wisconsin 1989–2004, New



Source: WISH (Wisconsin Interactive Statistics on Health), Infant Mortality Module, accessed 8/9/05.



Infant mortality rate ratio of non-Hispanic black to non-Hispanic white by state, 2005–2007



Source: National Vital Statistics System, NCHS, CDC



African American Infant Mortality Rates, Reporting States and District of Columbia, 2006–2008

Rank	State	AA IMR
1	Washington	7.66
2	Oregon	10.16
3	Rhode Island	10.56
4	California	10.72
5	Mass.	10.90
6	Iowa	11.10
7	New York	11.29
8	Minnesota	11.33
9	Texas	11.69
10	Colorado	11.97
11	New Jersey	12.06
12	Kentucky	12.13
13	Nevada	12.54
14	Georgia	12.70
15	Florida	12.83

Rank	State	AA IMR
16	S. Carolina	12.97
17	Maryland	12.98
17	Nebraska	12.98
19	Connecticut	13.11
20	Virginia	13.40
21	Illinois	13.45
22	Delaware	13.46
23	Arkansas	13.53
24	Alabama	13.73
25	Mississippi	13.82
26	Louisiana	13.88
27	Oklahoma	13.91
28	Pennsylvania	14.14
29	Missouri	14.49
30	Kansas	14.62

Rank	State	AA IMR
30	N. Carolina	14.62
32	Michigan	14.70
33	Arizona	14.85
34	W. Virginia	14.93
35	Ohio	15.03
36	Wisconsin	15.14
37	Indiana	15.36
37	Tennessee	15.36
39	District of Columbia	17.68
40	Hawaii	18.54

Mathews TJ, MacDorman MF. (2011) Infant mortality statistics from the 2008 period linked birth/infant death data set. National vital statistics reports; vol 60 no 5. Hyattsville, MD: National Center for Health Statistics.



Infant Mortality Rates, 2006–2010

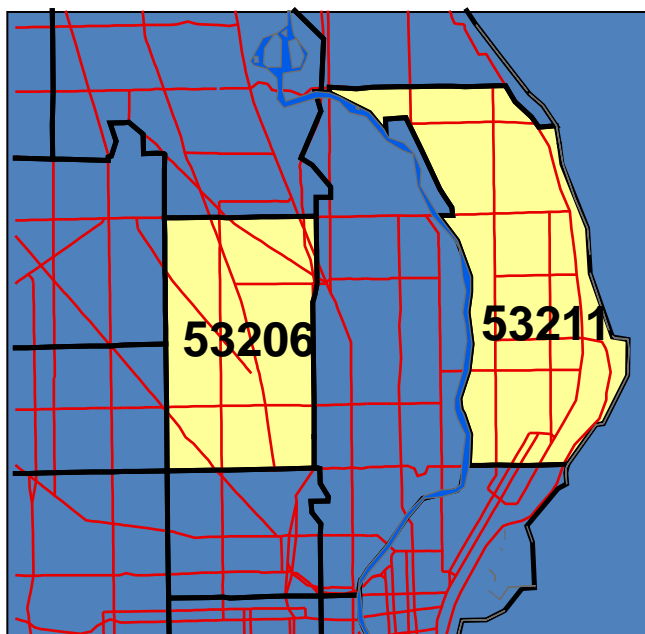
Selected Counties and Cities

State/County City	White	Black	Hispanic	B/W Ratio
Dane	4.1	12.2	4.2	3.0
Madison	5.2	14.5	3.2	2.8
Kenosha	5.3	8.2	4.4	1.5
Kenosha City	4.8	7.6	4.8	1.6
Milwaukee	5.4	15.0	7.2	2.8
Milwaukee City	5.8	15.0	7.2	2.6
Racine	6.5	18.1	8.8	2.8
Racine City	6.3	18.4	8.0	2.9
Rock	6.2	17.0	6.8	2.7
Beloit	8.8	13.8	4.5	1.6
Wisconsin	5.2	14.7	5.9	2.8

WISH (Wisconsin Interactive Statistics on Health), Infant Mortality Module, accessed 08/22/12. Wisconsin Department of Health Services, Division of Public Health



A Tale of Two ZIP Codes



	<u>53206</u>	<u>53211</u>
Population*	32,868	35,225
Median age*	25.8	29.9
African American*	96.1%	2.5%
High school graduate (25+ years of age)*	57.6%	95.7%
Disabled (21–64 years of age)*	37.0%	9.3%
Median family income*	\$21,867	\$70,704
Families below poverty level*	35.0%	3.6%
Teen birth rate 2004**	111	3
HIV rate 2004***	47	9
STD rate (15–19 years. of age)***	22,795	1,070

* Source: 2000 U.S. Census data

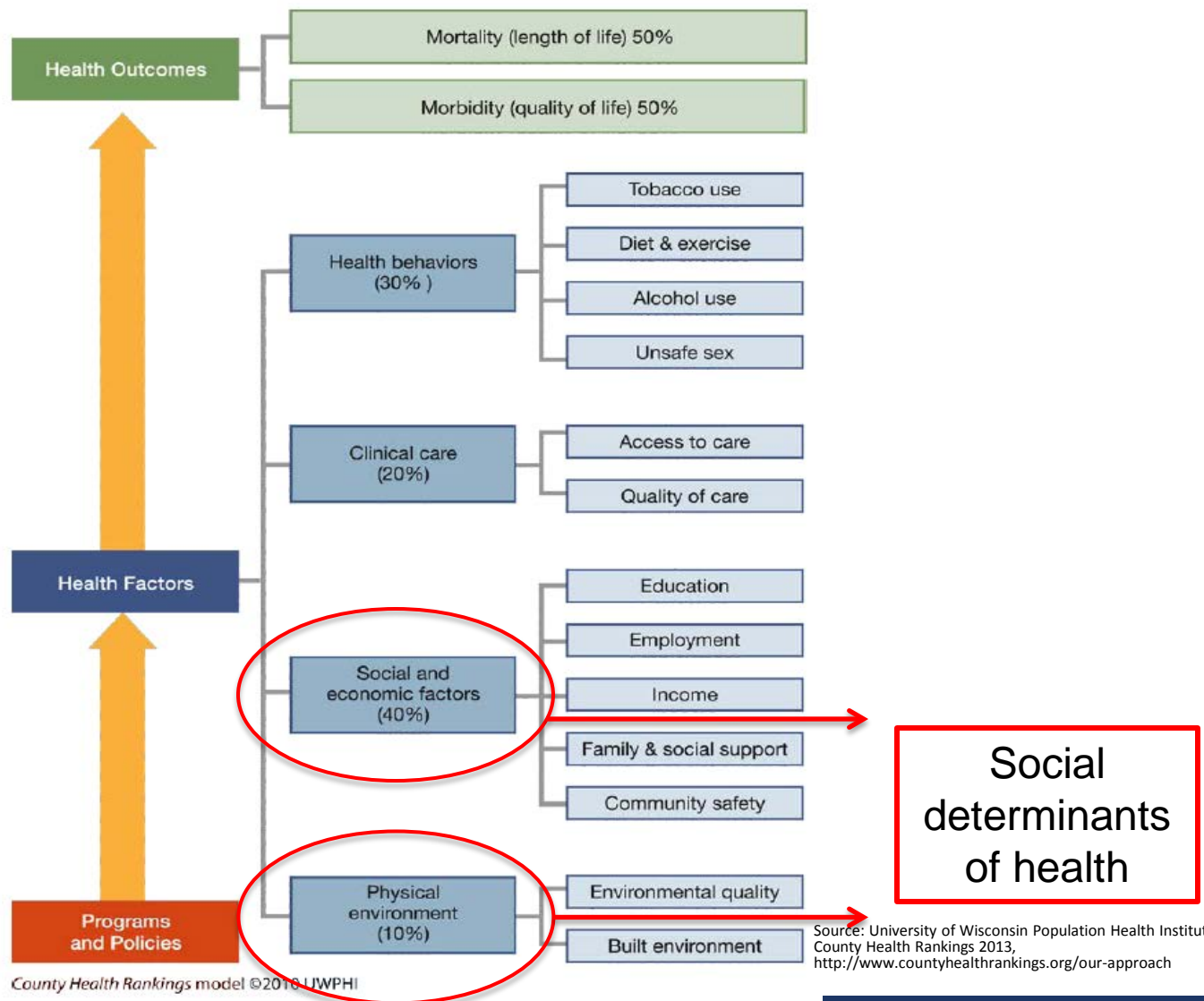
** Per 1,000 population

*** Per 100,000 population

Hoxie, N



Factors that influence health





Infant Mortality Rate by Race/Ethnicity and Education, Wisconsin 2008–2010

Education	Total	African American	White	B/W Disparity
Less than High School	10	16	10	1.6
High School Graduate	7	12	6	1.9
More than High School	5	14	4	3.3

WISH (Wisconsin Interactive Statistics on Health), Infant Mortality Module.



High School Graduation

Ranking of States by Black High School Graduation Rate

Rank	State	Black Graduation Rate
1	New Mexico	73%
2	West Virginia	70%
3	Arkansas	69%
4	Maryland	66%
5	Oklahoma	66%
6	Massachusetts	65%
7	Virginia	64%
8	Alaska	64%
9	Rhode Island	63%
10	Louisiana	62%
11	Texas	62%
12	Mississippi	61%
13	Alabama	59%
14	California	58%
15	Missouri	58%
16	Iowa	58%
17	Delaware	58%
18	Pennsylvania	58%
19	Colorado	56%
20	Connecticut	56%

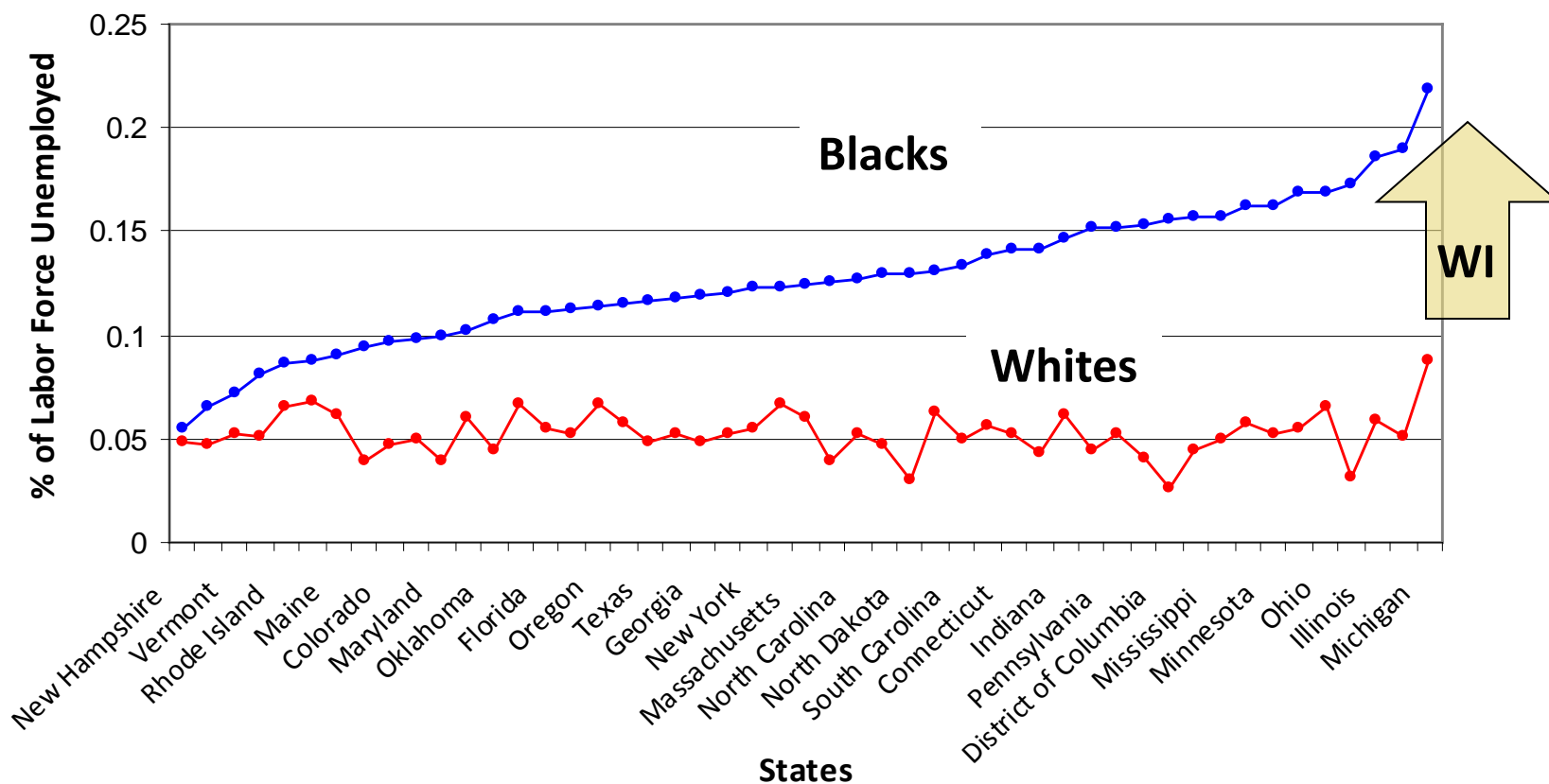
21	Michigan	56%
22	Nebraska	55%
23	Indiana	53%
24	Illinois	53%
25	Washington	53%
26	Ohio	52%
27	Hawaii	51%
28	Oregon	50%
29	Nevada	50%
30	Florida	47%
31	New York	47%
32	Georgia	46%

33 Wisconsin 44%

Source: 2003 Data from the U.S. Department of Education, Manhattan Institute Report



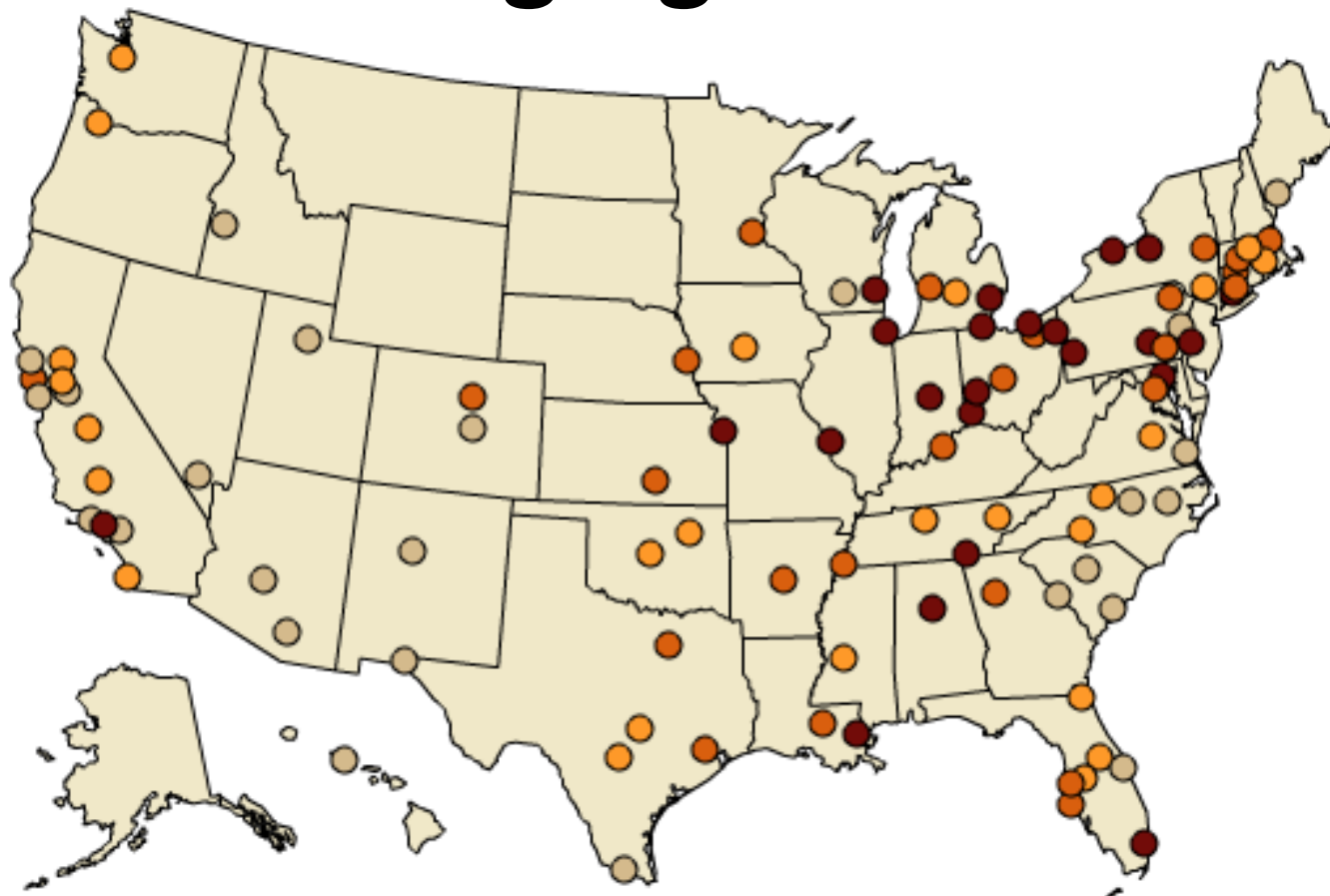
Unemployment Rates



Source: U.S. Census Bureau American Community Survey 2006-2008



Segregation

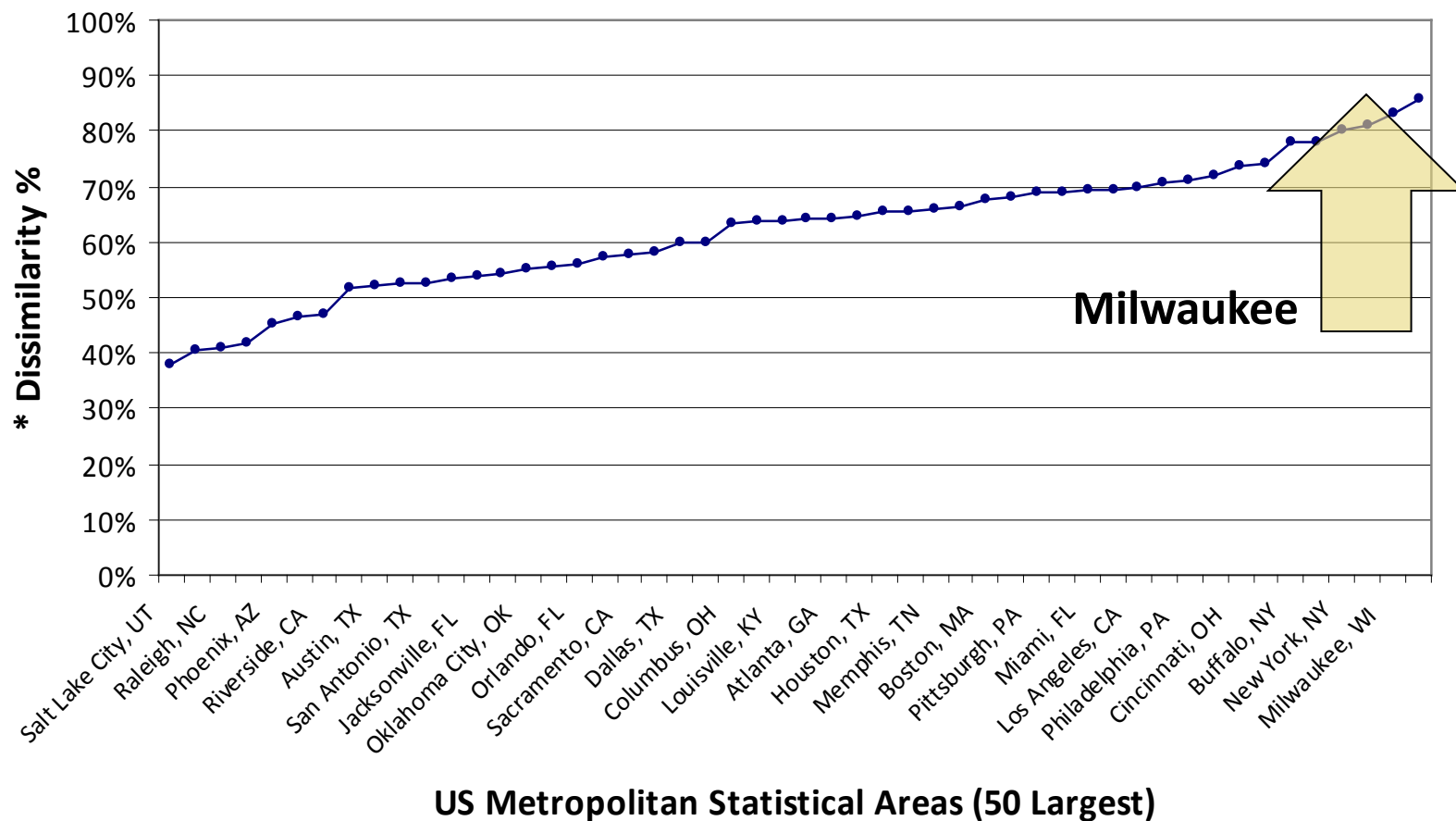


Key: ● 26.8% - 51.7% ● 51.7% - 58.6% ● 58.6% - 67.5% ● 67.5% - 85.7%

Source: Diversitydata.org; U.S. Census Bureau, 2000 Census



Segregation

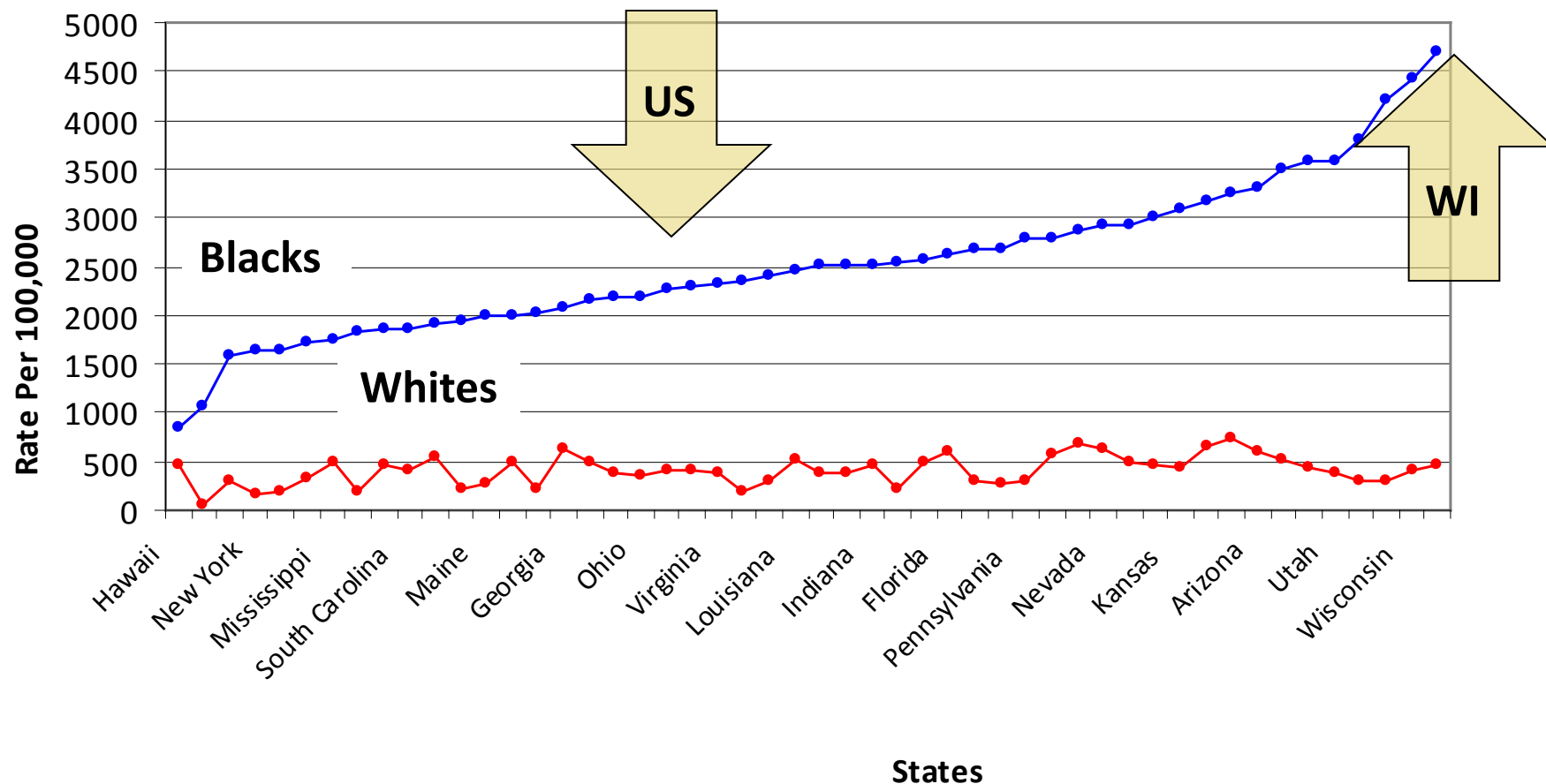


* 0% = absolute integration; 100% = absolute segregation

Source: U.S. Census Bureau, 2000 Census



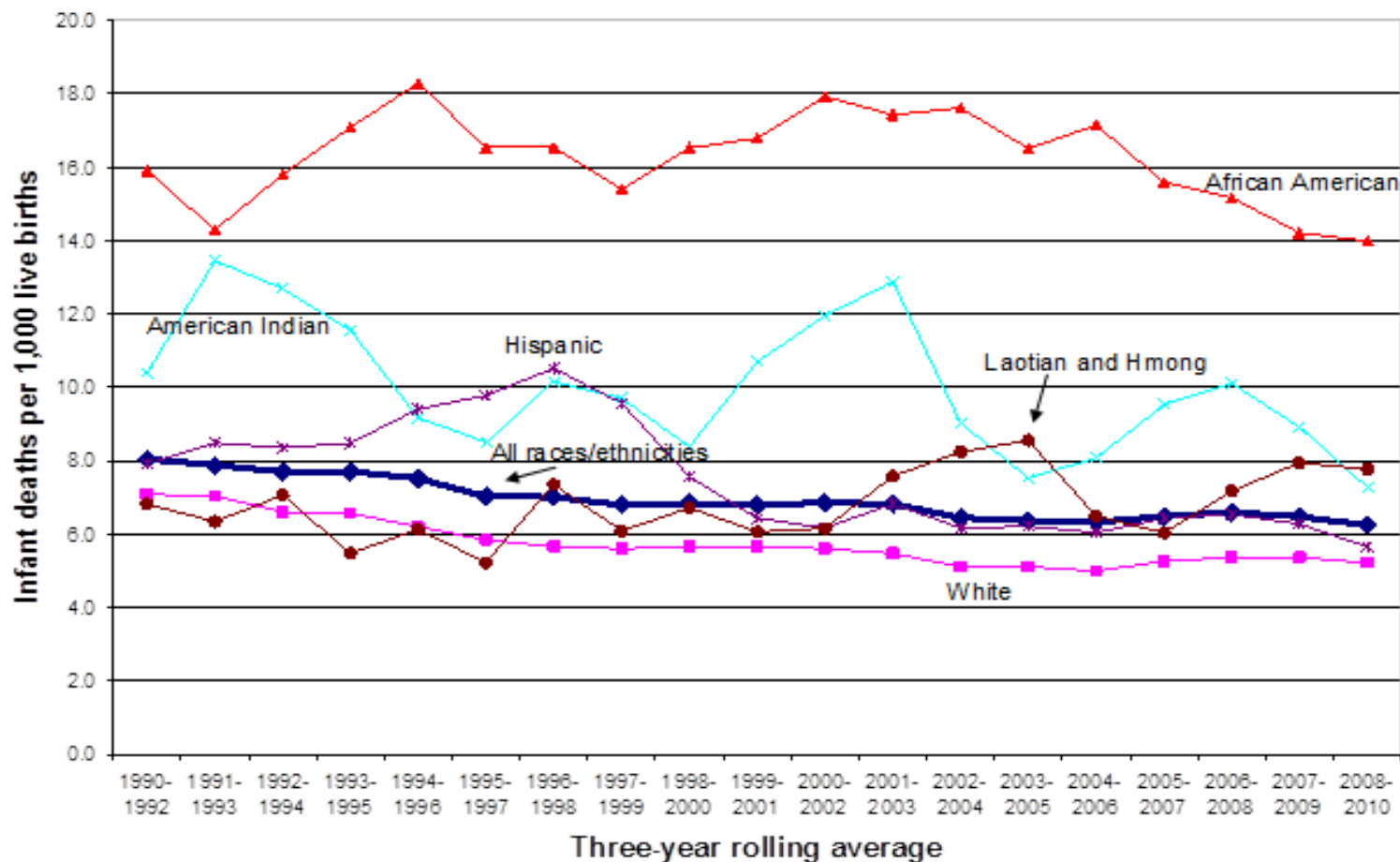
Jail and Prison Incarceration Rates



Source: Bureau of Justice Statistics, Prison and Jail Inmates at Midyear 2005



Wisconsin Infant Mortality Rates by Race/Ethnicity 1990–2010

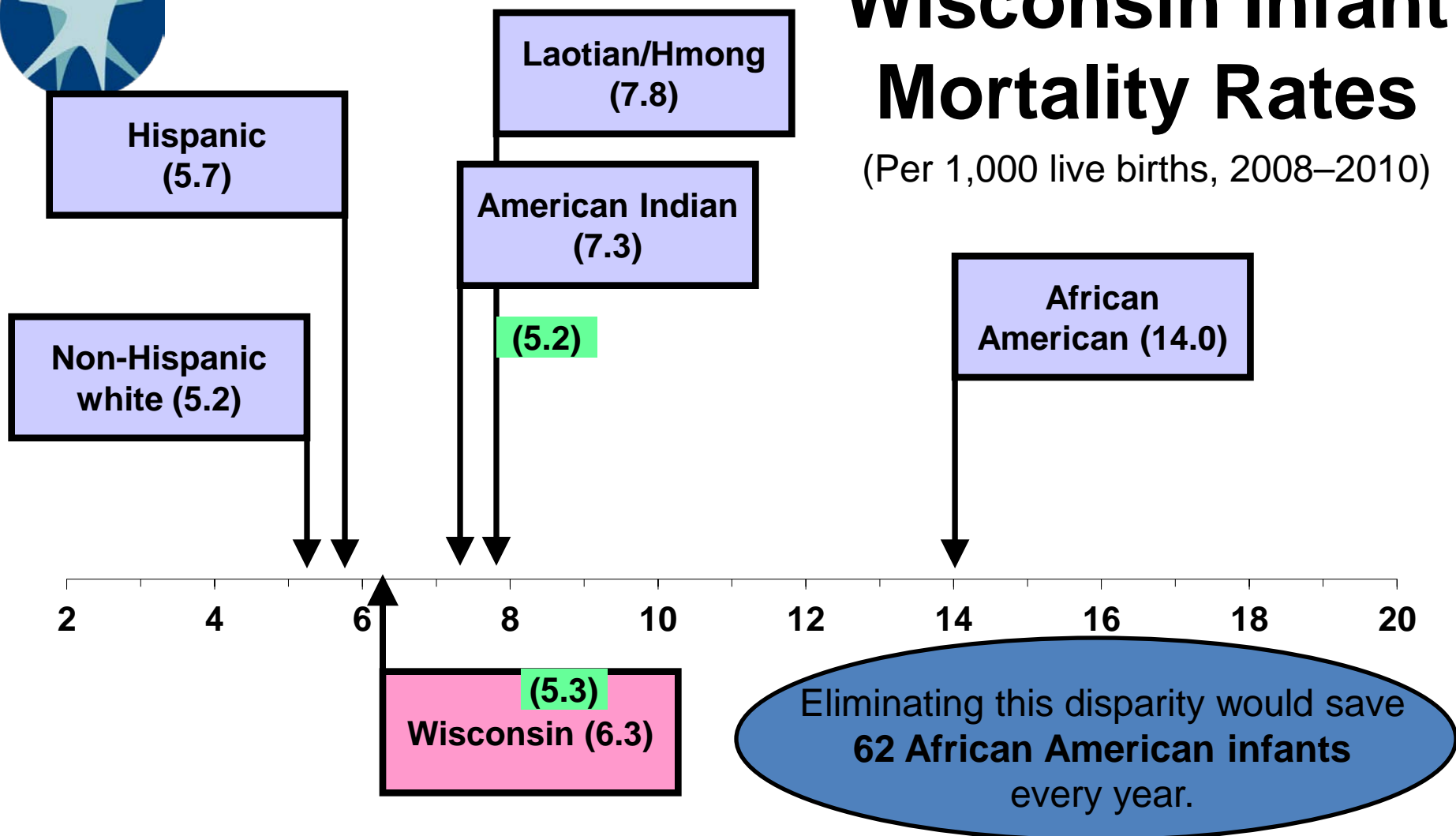


Wisconsin Births and Infant Deaths, 2010.



Wisconsin Infant Mortality Rates

(Per 1,000 live births, 2008–2010)



Modeled after Booske BC, Kempf AM, Athens JK, Kindig DA, Remington PL. *Health of Wisconsin Report Card*. University of Wisconsin Population Health Institute, 2007.

WISH, 2008-2010



Wisconsin Pregnancy Risk Assessment Monitoring System (PRAMS)





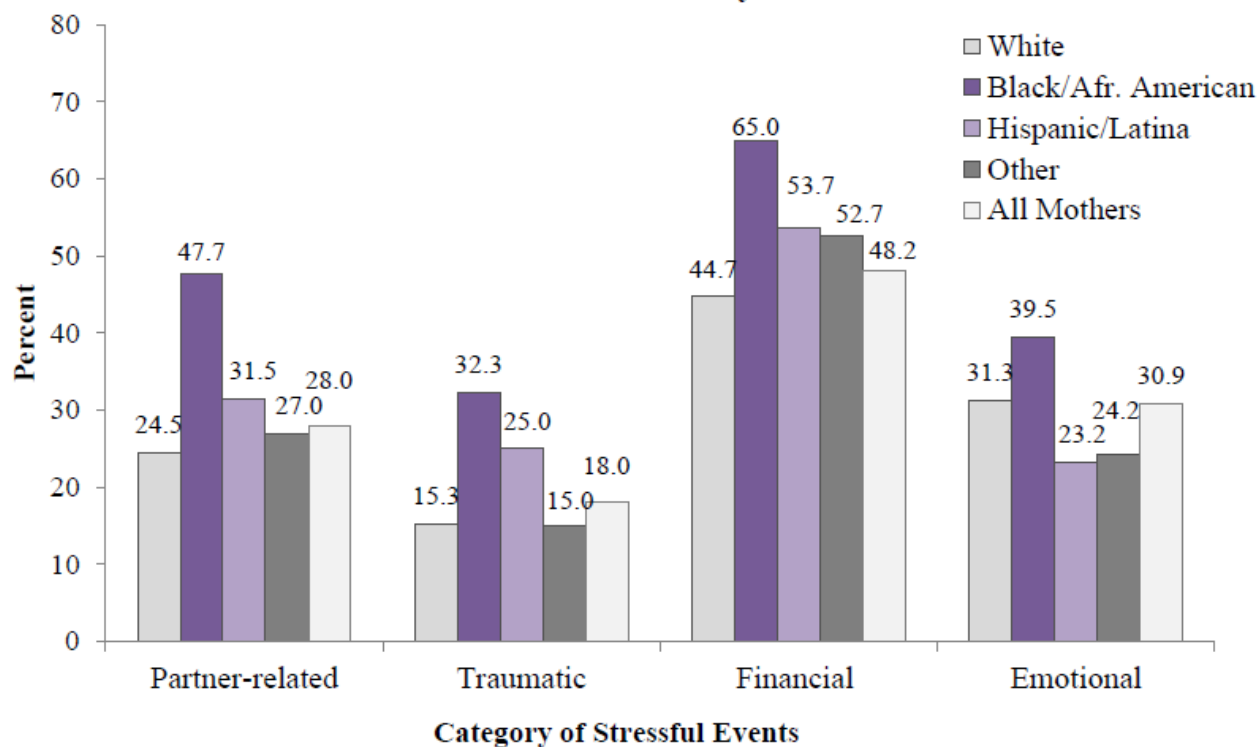
What Is PRAMS?

- Survey of new mothers
- Mothers contacted by mail and phone
- Asks about experiences before, during, and after pregnancy
- Topics include:
 - Prenatal care
 - Health behaviors
 - Violence
 - Stress



Stressful Events

Figure 13. Percentage of Mothers Having Stressful Life Events in the 12 Months Before Giving Birth, By Category of Events and Race/Ethnicity



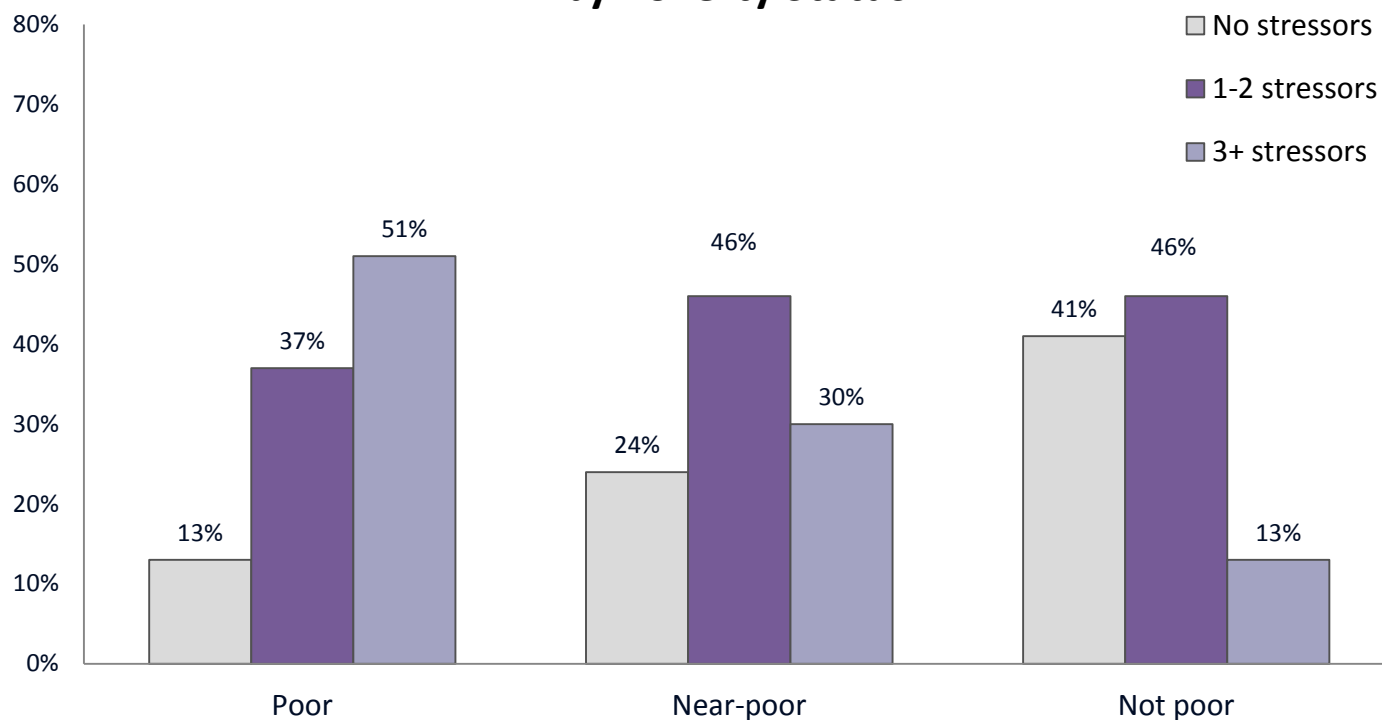
Source: 2009-2011 Wisconsin PRAMS, Office of Health Informatics, Division of Public Health, Wisconsin Department of Health Services.

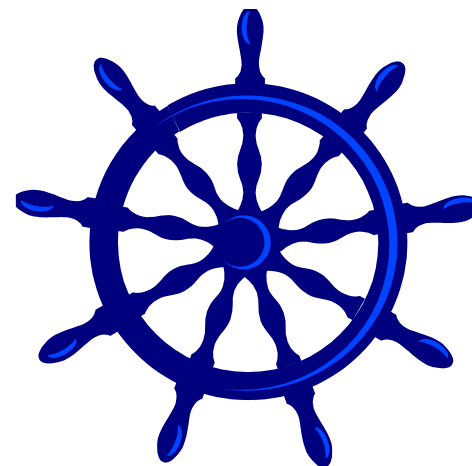
Note: Percentages do not add to 100; categories are not mutually exclusive; n=3,437.



What Moms Tell Us About Social Determinants

Stressors Before Birth, by Poverty Status



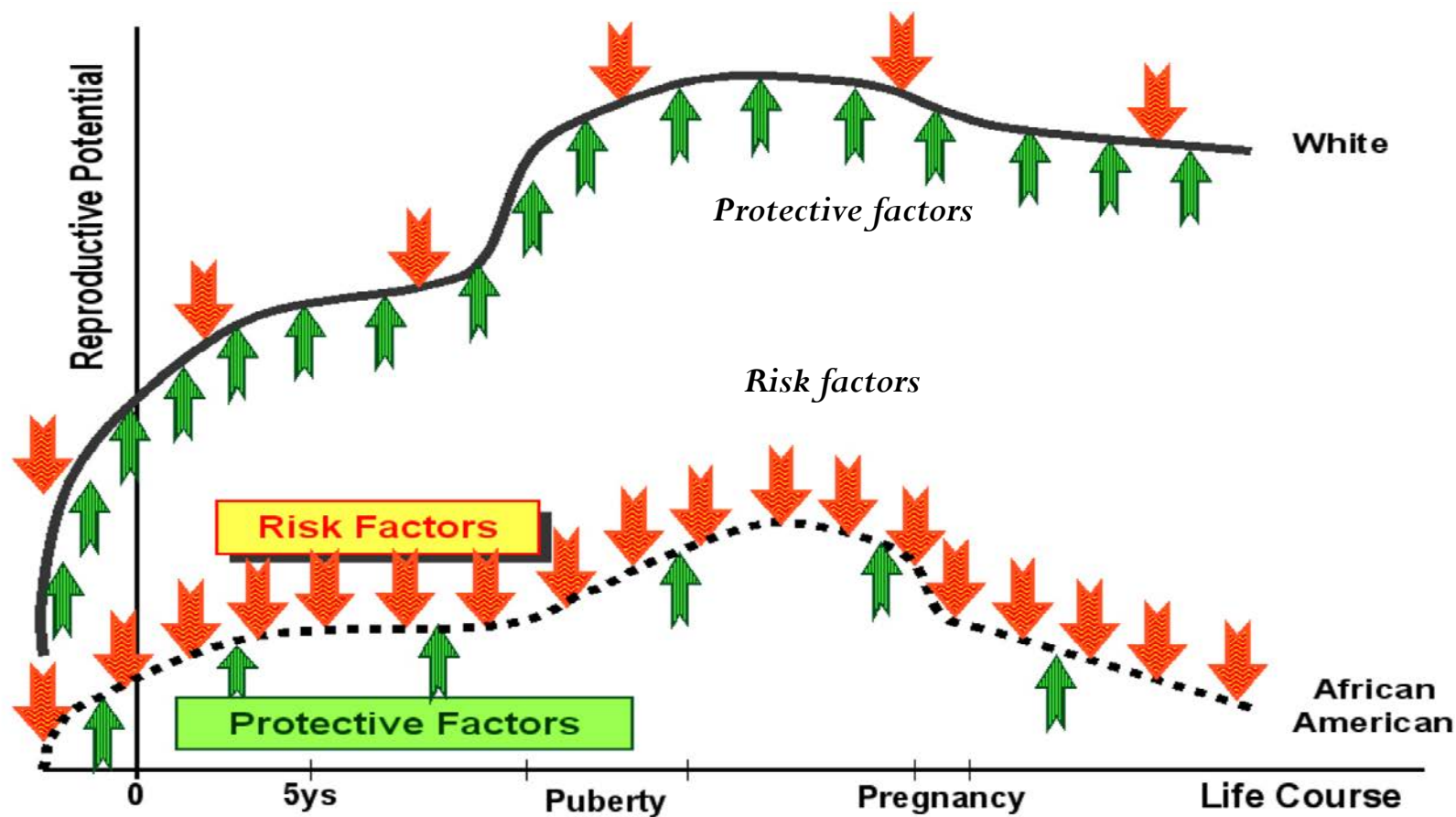


Life Course Theory to Action: **Improving Birth Outcomes**



Healthy Babies Summit

(Lu and Halfon, 2003)





The Life Course Perspective

Health outcomes: Depend on biological, psychological, behavioral, and social **protective factors** and **risk factors** over a person's **entire life span**

Birth outcomes: The end product of not only the nine months of pregnancy, but **the entire life course of the mother leading up to the pregnancy**

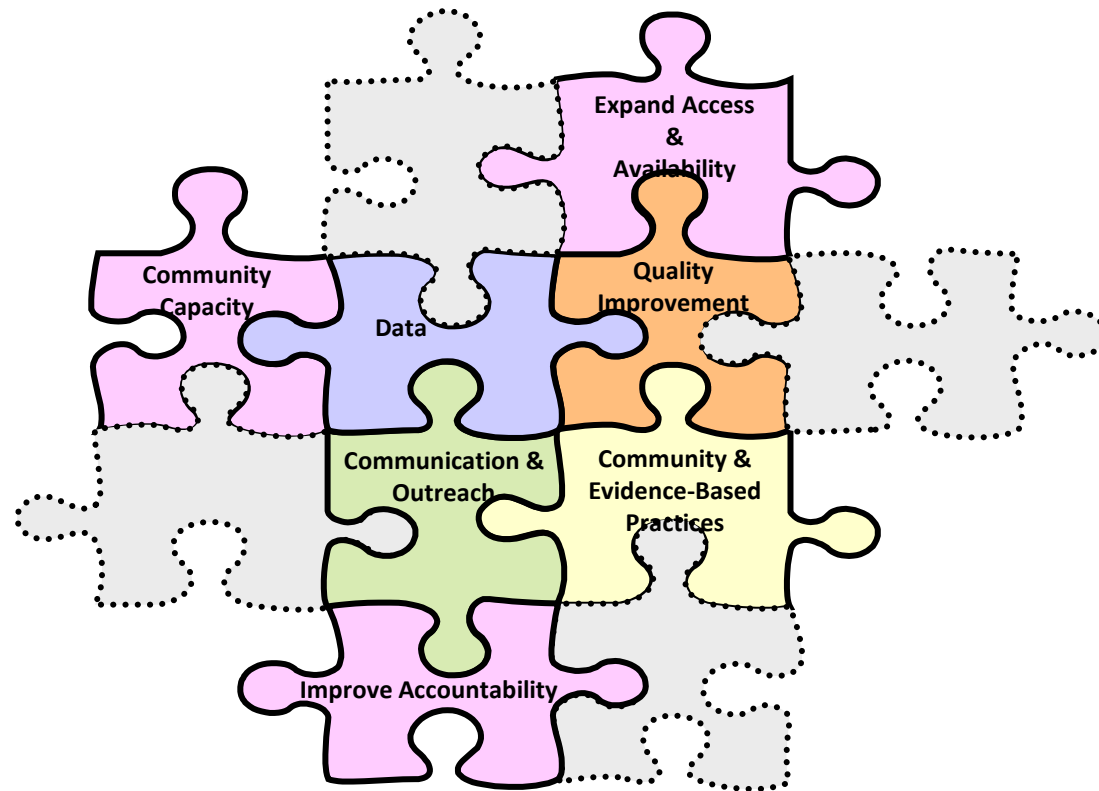




A Framework for Action to Eliminate Racial and Ethnic Disparities in Birth Outcomes

**Wisconsin
2008–2011**

<http://www.dhs.wisconsin.gov/healthybirths/>





ABCs for Healthy Babies

- Focus group research, conducted in 2008
- Milwaukee, Racine, Kenosha, Beloit, Madison
- 18 groups; 180 African American mothers, fathers, and grandmothers
- State Minority Health and Tobacco funds

ABCs for Healthy Babies

A Social Marketing Campaign for Eliminating
Racial and Ethnic Disparities in Birth Outcomes
in Southeastern and Southern Wisconsin

FINAL REPORT

Concept and Message Testing:

Milwaukee, Beloit, Racine
Kenosha, Madison/Dane
County

*A Project of New Concept Self Development
Center, Inc.
and Jump at the Sun Consultants, LLC.*





ABCs for Healthy Families



HRSA First Time Motherhood/ New Parents Initiative

- Improve birth outcomes for African American infants in Wisconsin.
- Increase integration of life course perspective into preconception/interconception care.
- Link to health and support services in Milwaukee and Racine.
- Increase father involvement and support couples transitioning to roles as parents.



TECHNICAL ADVISORY GROUP (

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Mario Drummonds, M.S., L.C.S.W., M.B.A., executive director, CEO, Northern Manhattan Perinatal Partnership, Harlem, NY

Fleda Mask Jackson, Ph.D., member of the National Advisory Committee on Health Disparities for the Centers for Disease Control and Prevention

James Collins, M.D., M.P.H., attending physician, neonatology; professor of pediatrics, Northwestern University's Feinberg School of Medicine

Kumea Shorter-Gooden, Ph.D., full professor and system-wide director of international-multicultural initiatives, Alliant International University, Alhambra, California





Community Advisory Board

Purpose:

To provide a forum for community and family members to participate in the planning, implementation, and evaluation of *ABCs for Healthy Families*

Composition:

- Social services agencies
- Health providers
- Community advocates
- Mothers, fathers, students, parents, retired nurses, etc.





Billboard

**Let's deal with
stress in ways
that don't stress
our babies**

.....

text "NoStress" to 32075

myspace.com/JourneyofaLifetime



text4babySM

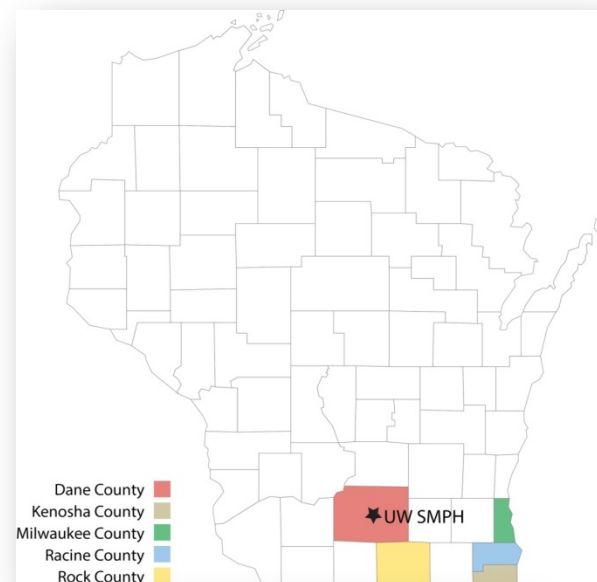
- Free service for pregnancy and baby's first year
- ~15,000 Wisconsin mothers have enrolled since 2010 launch
- 31 Wisconsin users per 1,000 estimated pregnancies and live births



Lifecourse Initiative for Healthy Families

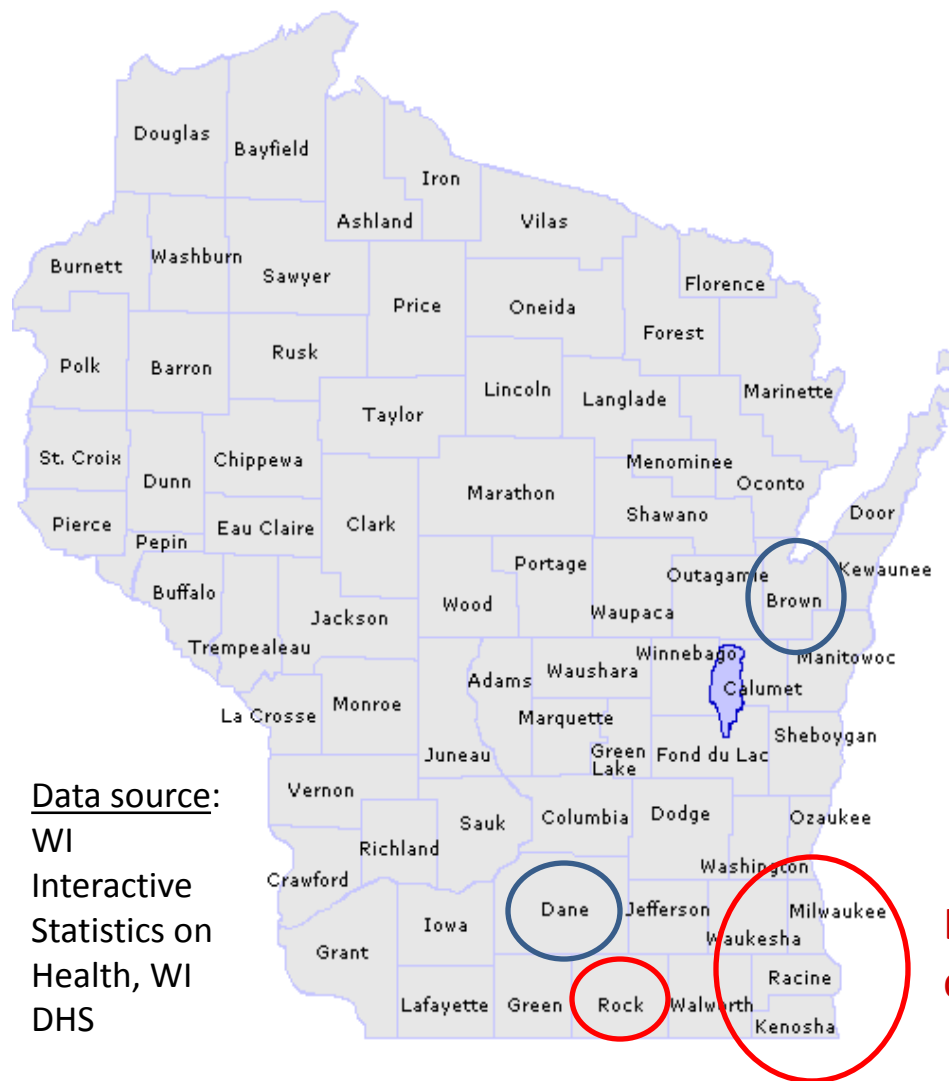
General Overview

- The Wisconsin Partnership Program's regional effort to support partnerships with communities to address high infant mortality among African Americans in Wisconsin.
- Emphasis on sustainable health impact, social determinants of health, and widespread improvements.
- Invest in community-academic partnerships, education, research, and evaluation.



University of Wisconsin
**SCHOOL OF MEDICINE
AND PUBLIC HEALTH**

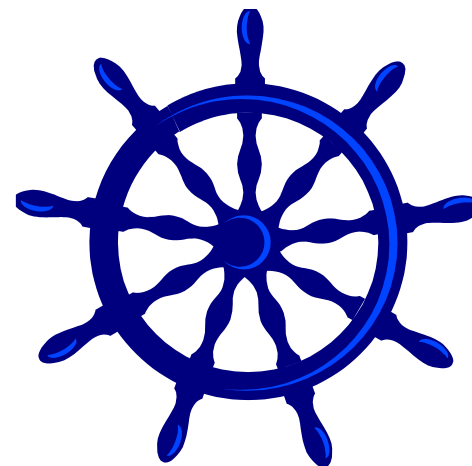
African American Births, Deaths, and Infant Mortality Rates in Wisconsin, 2006–2010



Data source:
WI
Interactive
Statistics on
Health, WI
DHS

County	% AA births	IM rate
Brown	2%	15.8
Dane	7%	12.2
Kenosha	3%	8.2
Milw.	76%	15
Racine	6%	18.1
Rock	2%	17
Total WI	35,612	14.7

LIHF
communities



Life Course Theory to Action:

Improving Women's Health

WISCONSIN'S STATEWIDE FRAMEWORK FOR IMPROVING WOMEN'S HEALTH

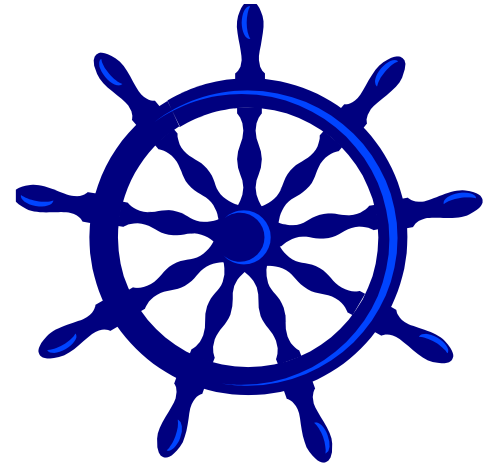


<http://www.dhs.wisconsin.gov/healthybirths/>



Everywomanwisconsin.org



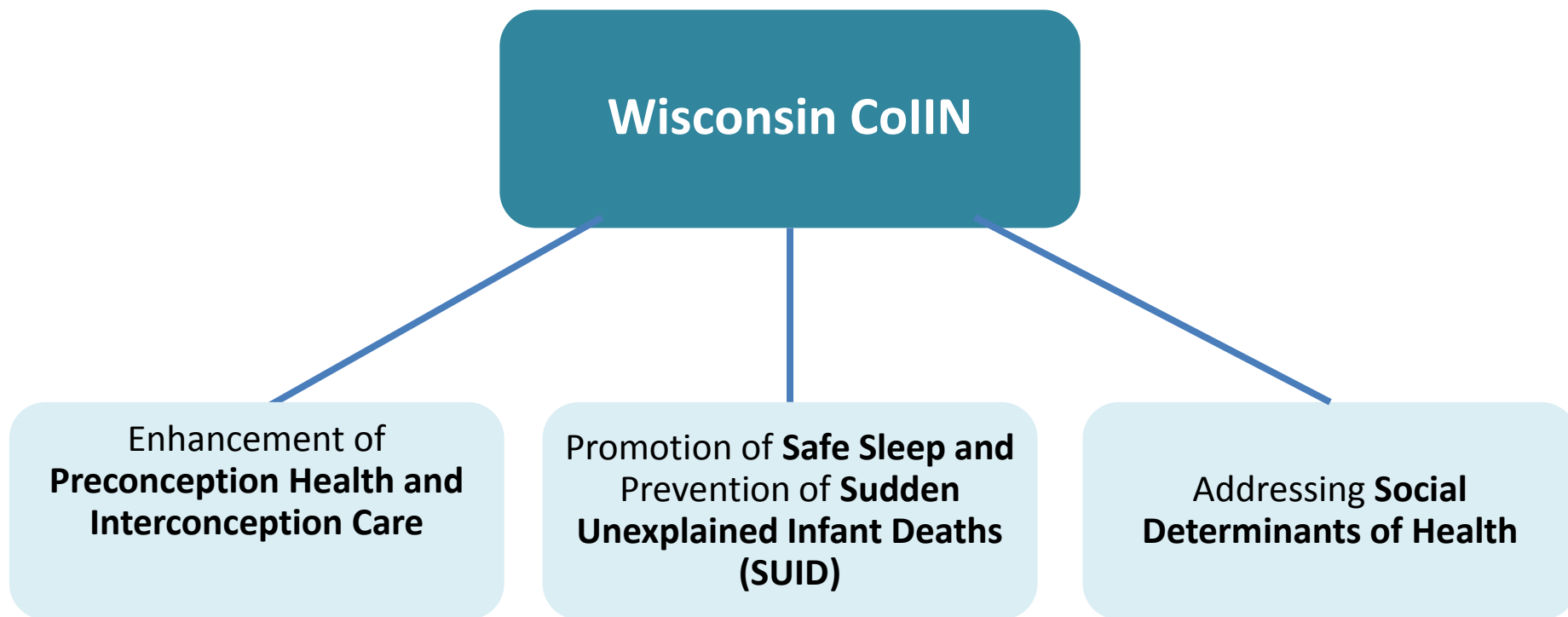


Life Course Theory to Action:

Collaborative Improvement and Innovation Network (CoIN) to Reduce Infant Mortality



Wisconsin CollN Topics 2014–2016





Wisconsin CoIN: Progress to Date

- Three active teams since March 2014.
- More than 50 statewide and local partners.
- Region V transitioned to national effort in 2015.
- Reports to Statewide Maternal and Child Health Advisory Committee three times a year.
- Integration into ongoing MCH Program strategies.



Wisconsin CollN

Examples of strategies

Preconception and Interconception Care

- Improved provider communication with adolescents
- Medicaid managed care medical homes

Safe Sleep and SUID

- Advancing hospital policies
- Training home visitors

Social Determinants of Health

- Action plan with leadership team and community input
- Addressing domains of criminal justice reform and income/employment



Thank You!

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