# Perinatal Periods of Risk:

Using Data as a Community Tool for Maternal and Child Health Planning and Programming

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A note before we move on...

# ALL DATA ARE FOR ZIP CODES 43206 AND 43207 UNLESS OTHERWISE STATED!



#### PPOR Analysis is...

- A way to use data to reduce infant mortality
- A community-based approach
- Part of a cycle of processes
- Simple (really! [kind of])

Assessment

Sustainability and
Cultural
Competence

Implementation

Planning

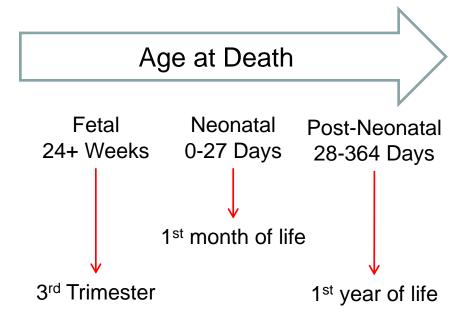
Complexity → Simplicity

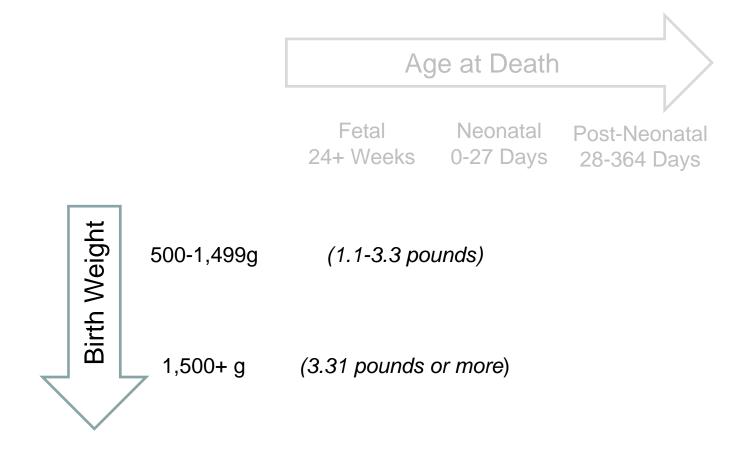


Age at Death

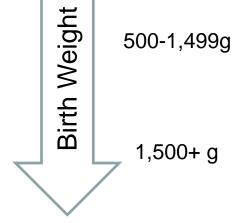
Fetal 24+ Weeks Neonatal 0-27 Days

Post-Neonatal 28-364 Days









Maternal Health/Prematurity			
Maternal	Newborn	Infant	
Care	Care	Health	



Fetal Neonatal Post-Neonatal 24+ Weeks 0-27 Days 28-364 Days

Maternal Health/Prematurity
Chronic Disease Prevention
Health Behavior Change
Perinatal Care

1,500+g



Fetal 24+ Weeks Neonatal 0-27 Days

Post-Neonatal 28-364 Days

500-1,499g

#### **Maternal Health/Prematurity**

Chronic Disease Prevention Health Behavior Change Perinatal Care

#### **Maternal Care**

Prenatal Care
High Risk Referral
Obstetric Care

1,500+g



Fetal 24+ Weeks Neonatal 0-27 Days

Post-Neonatal 28-364 Days

500-1,499g

#### **Maternal Health/Prematurity**

Chronic Disease Prevention Health Behavior Change Perinatal Care

**Maternal Care** 

Prenatal Care
High Risk Referral
Obstetric Care

**Newborn Care** 

Perinatal Management Neonatal Care Pediatric Surgery

1,500+ g



Fetal 24+ Weeks Neonatal 0-27 Days

Post-Neonatal 28-364 Days

500-1,499g

#### **Maternal Health/Prematurity**

Chronic Disease Prevention Health Behavior Change Perinatal Care

Prenata

Prenatal Care
High Risk Referral
Obstetric Care

**Maternal Care** 

**Newborn Care** 

Perinatal Management Neonatal Care Pediatric Surgery **Infant Health** 

Safe Sleep
Injury Prevention
Infection Prevention

1,500+ g

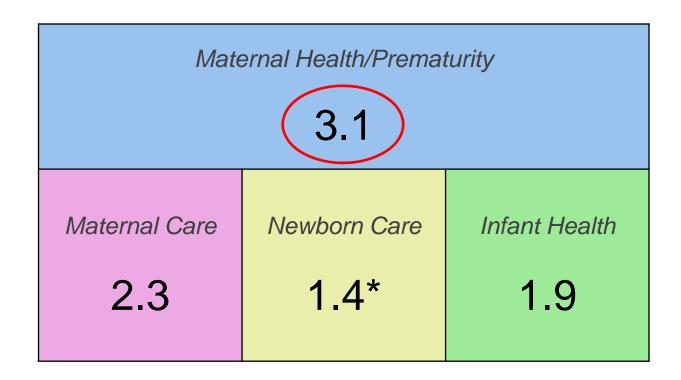


## South Side Birth, Death, and Demographic Data

- Approximately 1,074\* births annually
  - 13\* infant deaths
  - 6\* fetal deaths
- 59.9% Non-Hispanic White^
  - 13+ years of education: 39.6%
  - Below poverty in the past 12 months: 18.6%
  - 2011 inflation-adjusted mean income: \$30,452
- 33.2% Non-Hispanic Black^
  - 13+ years of education: 38.4%
  - Below poverty in the past 12 months: 30.9%
  - 2011 inflation-adjusted mean income: \$14,273
  - \* Annual average ^ US Census 2004-2009 Ohio Department of Health Vital Statistics Data Analyzed by Office of Epidemiology



### South Side PPOR Map



<sup>\*</sup> Unreliable rate 2004-2009 Ohio Department of Health Vital Statistics Data Analyzed by Office of Epidemiology



### South Side PPOR Map

Maternal Health/Prematurity					
3.1					
Maternal Care					
2.3 1.4* 1.9					

$$3.1 + 2.3 + 1.4 + 1.9$$

8.7 fetal and infant deaths for every 1,000 live births and fetal deaths

<sup>\*</sup> Unreliable rate 2004-2009 Ohio Department of Health Vital Statistics Data Analyzed by Office of Epidemiology



### South Side PPOR Map

Maternal Health/Prematurity					
3.1					
Maternal Care Newborn Care Infant Health					
2.3	1.9				
2.3 1.4*		1.9			

<sup>\*</sup> Unreliable rate 2004-2009 Ohio Department of Health Vital Statistics Data Analyzed by Office of Epidemiology



## What do these rates mean to you?

- Too high?
- How do we compare?
- What's possible?
- What's fair?
- What's "good"?
- What do YOU want South Side fetal and infant mortality rates to be?

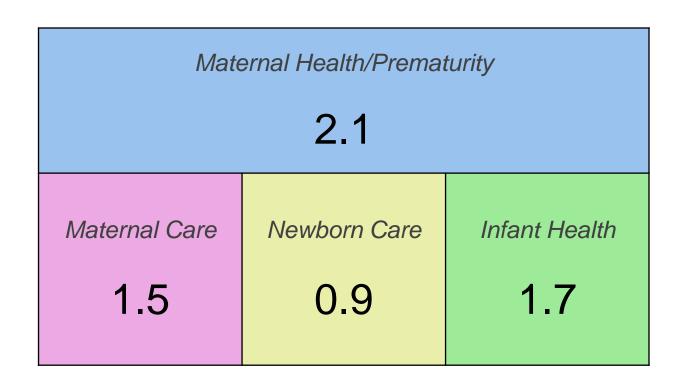


## Franklin County Reference Group

- Non-Hispanic White
- 20+ years of age
- High school graduate



## Franklin County Reference Group



2004-2009 Ohio Department of Health Vital Statistics Data Analyzed by Office of Epidemiology



### Disparity ~ Gap ~ Difference

#### South Side

Maternal Health/Prematurity					
3.1					
Maternal Newborn Infant Care Care Health					
2.3 1.4* 1.9					

#### Reference Group

Maternal Health/Prematurity					
2.1					
Maternal Newborn Infant Care Care Health					
1.5 0.9 1.7					

\* Not reliable due to a smaller number of deaths 2004-2009 Ohio Department of Health Vital Statistics Data Analyzed by Office of Epidemiology



### Disparity ~ Gap ~ Difference

#### South Side

Maternal Health/Prematurity					
3.1					
Maternal Newborn Infant Care Care Health					
2.3 1.4* 1.9					

#### Reference Group

Maternal Health/Prematurity					
2.1					
Maternal Newborn Infant Care Care Health					
1.5 0.9 1.7					

Maternal Health/Prematurity			
1.0			
Maternal Newborn Infant Care Care Health			
0.8	0.5	0.2	

\* Not reliable due to a smaller number of deaths 2004-2009 Ohio Department of Health Vital Statistics Data Analyzed by Office of Epidemiology



## South Side Excess or Preventable Deaths

Maternal Health/Prematurity				
1.0				
Maternal Newborn Infant Care Care Health				
0.8 0.5* 0.2				

$$1.0 + 0.8 + 0.5 + 0.2$$

2.5 EXCESS fetal and infant deaths for every 1,000 live births and fetal deaths

6,479 fetal deaths and live births during 2004-2009

16 EXCESS DEATHS

\* Not reliable due to a smaller number of deaths 2004-2009 Ohio Department of Health Vital Statistics Data Analyzed by Office of Epidemiology

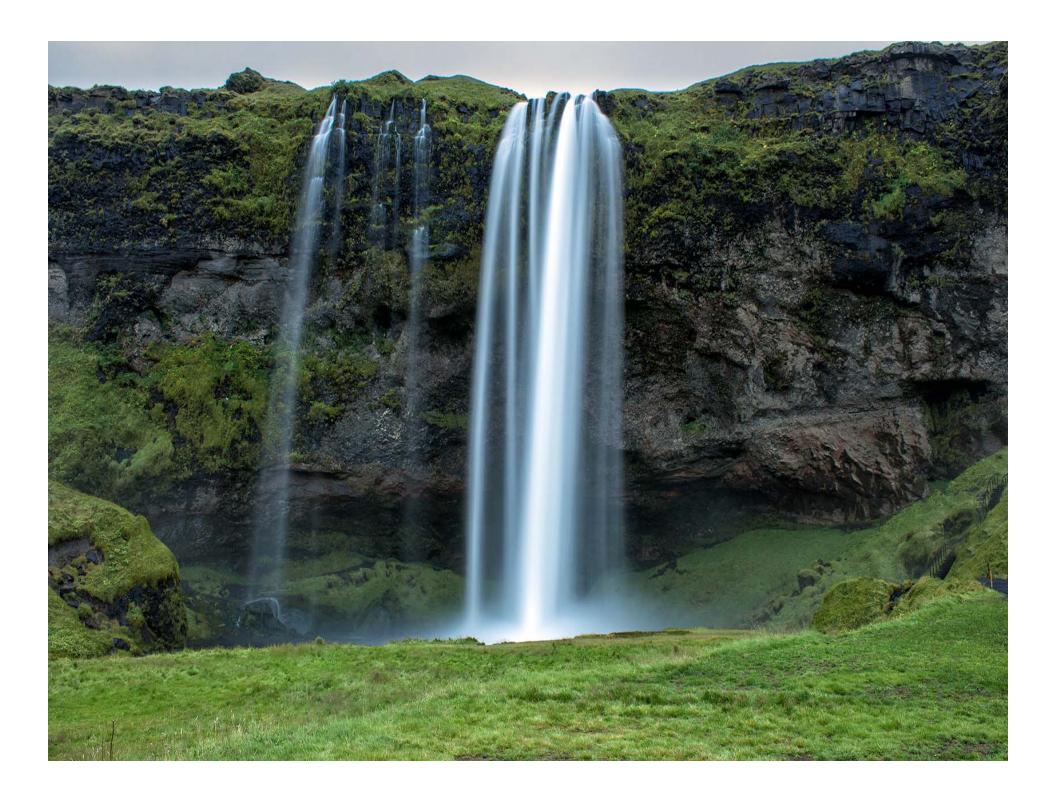


### Are 16 "Preventable" Deaths in 6 Years a Crisis?

- Infant mortality is the tip of the iceberg
- 43206 includes German Village, a higher socioeconomic status neighborhood
- Health inequities are unfair, unacceptable, and really expensive!







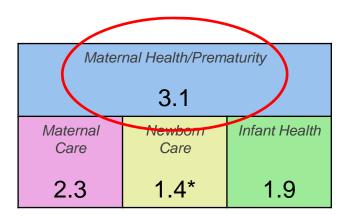
## What happens after we finish our PPOR map?



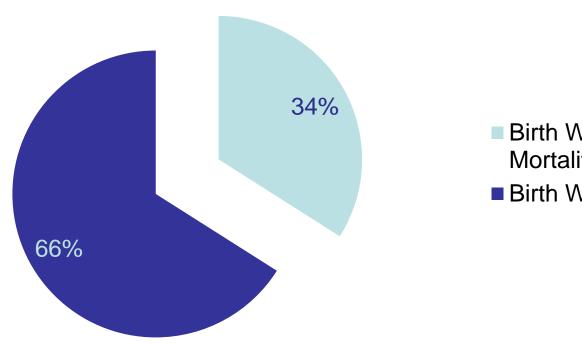


## South Side- Maternal Health and Prematurity Group

- Birth weight distribution
  - Too many low and very low birth weight births
  - Prevalence and impact of risk factors for low birth weight births and prematurity
- Birth weight specific mortality
  - Too many deaths in a specific birth weight range
  - Aspects of perinatal care system



### Maternal Health and Prematurity



- Birth Weight Specific Mortality
- Birth Weight Distribution

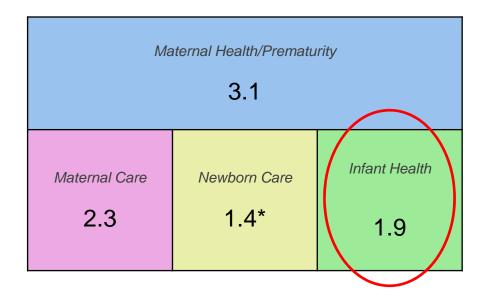
## Risk Factors for Very Low Birth Weight and Prematurity

2004-2009	South Side	FC Reference	<b>Disparity Ratio</b>
Not Married	76.1	26.2	2.9
Medicaid Birth*	52.2	18.0	2.9
Using WIC*	66.7	23.2	2.9
Inadequate PNC^	26.4	11.3	2.3
Any Smoking During Pregnancy	32.7	14.9	2.2
Previous Preterm Birth	5.4	4.1	1.3
Obese*	27.7	23.7	1.2
Birth Spacing < 18 Months	23.0	20.2	1.1
Overweight or Obese*	36.9	47.6	0.8
Multiples	24.8	32.8	0.8

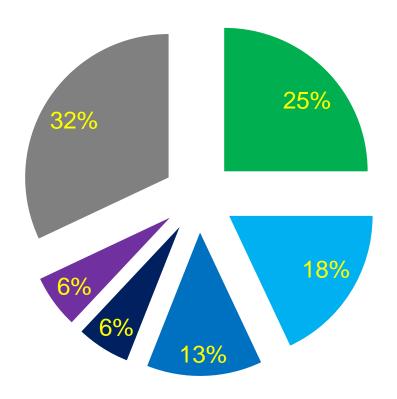


### South Side-Infant Health Group

Explore causes of death



#### Leading Causes of Infant Death



- Low Birth Weight and Prematurity
- Sudden Infant Death Syndrome (SIDS)
- Serious Birth Defects
- Maternal Complications of Pregnancy
- Necrotizing Enterocolitis of Newborn
- All Other Causes

2004-2009 Ohio Department of Health Vital Statistics, All South Side Infant Deaths, Data Analyzed by Office of Epidemiology



#### Possible Targeted Interventions

### Area 1: Reduce low birth weight and premature births

- Life course development and social determinants of health
  - Income
  - Education
  - Effects of racism
- Smoking
- Perinatal care

### Area 2: Reduce SIDS and other sleep related deaths

- Smoking
- Sleep position
- Breast-feeding
- Death scene investigation
- Bed sharing
- Bedding

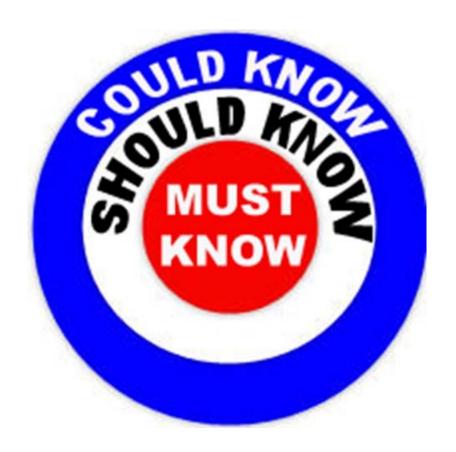
Non-traditional public health partners!!!



### Possible Targeted Interventions

#### **Area 3: Reduce serious birth defects**

- Folic acid
- Alcohol and drug use
- Diabetes
- Consistent and good medical care



### Take Home Messages

- PPOR and other analyses are vital tools in decision making
- Planning before acting is crucial, especially for a topic as complex as infant mortality
- Equity, justice, and creating oPPORtunities for all people are core public health values

