

Caring for 2

Project Summary 2005-2009



*Helping through every step of pregnancy...
and beyond!*

A LETTER FROM THE HEALTH COMMISSIONER

The health of infants and mothers is central to the mission of Columbus Public Health. Our efforts to protect and promote the health of childbearing women and their infants spans direct services for individual families to community involvement and building better systems of care.

The Columbus Public Health *Caring for 2* program, along with community partners, continues to provide initiatives focused on improving the health of women and their infants, while addressing the underlying causes of racial disparities in perinatal health. The causes for health and racial inequities that contribute to infant mortality are complex. Inadequate access to care, unequal treatment, limited access to education, livable incomes, safe housing, and racism all contribute to a system that perpetuates poor health outcomes for babies and their mothers.

We are proud to announce that Columbus Public Health has been awarded a second 5-year Federal Healthy Start Project Grant. This enables *Caring for 2* to build on the strong foundation of service delivery and community collaboration established to address the critical issue of infant mortality in Columbus.

Progress can be made only if we all work together to find a better way to positively impact the lives of women, children and families.



Teresa Long

Teresa Long, MD, MPH
Health Commissioner
Columbus Public Health



Laryyah, born May 28, 2009

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CARING FOR 2 PROJECT INTRODUCTION

The purpose of our *Caring for 2* project is to eliminate disparities in perinatal health. African American women have reproductive health outcomes and mortality rates at least twice as high as White women. In addition, women of color are much more likely to be poor, have more unhealthy risk exposures and have less access to and utilization of health care services. *Caring for 2* provides services to eliminate the disparities through direct services and initiatives to enhance the system of care. All of this work is coordinated through our Consortium and its' subcommittees in partnership with our project contractors.

Caring for 2 provide services for African American women in nine Columbus city zip codes that had an infant mortality rate (IMR) for 2002-2004 of 11.4 deaths per 1,000 live births for the project area and 15.1 deaths per 1,000 for African American women in this project area. Service focus is on pregnant and parenting African American women and their infants and includes the Core Services of Outreach & Client Recruitment, Case Management, Health Education, Interconceptional Care and Depression Screening and Referral. These services are provided by an interdisciplinary team of public health nurses, social workers and community care coordinators.

Caring for 2 has developed a strong Local Health System Action Plan (LHSAP). This plan is being implemented with committed partners and is focused on achieving the following results:

- Increased prenatal care access, capacity and utilization;
- Reduced SIDS and sleep-related deaths;
- Increased screening and appropriate treatment for Maternal Depression;
- Improved access to Interconceptual Care Services through implementation of an Ohio Medicaid Family Planning Waiver;
- Elimination of racial inequities that contribute to Infant Mortality;
- A Life-course perspective is integrated into *Caring for 2* initiatives.

The work of the LHSAP is accomplished through the community partnerships and ongoing work groups that have been formed to achieve results. This report provides an overview of the project.



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Caring for 2 Project Director
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WHAT IS CARING FOR 2?

The Columbus Public Health *Caring for 2* program is one of 102 Healthy Start projects in the nation that provide critical health and social services to address the issues of infant mortality, lowbirth weight and racial disparity in perinatal outcomes. *Caring for 2* provides services to increase access to healthcare and social services for African American women and their infants in three Columbus neighborhoods, covering nine zip codes.

Focus Areas

In 2005, Franklin County's Infant Mortality Rate (IMR) exceeded the national 2010 goals of no more than 4.5 deaths per 1000 live births, even for non-Hispanic White mothers. For non-Hispanic African American mothers, IMRs were more than twice as high as those of non-Hispanic White mothers. Within Columbus and Franklin County, there were nine zip codes with higher rates and greater disparities. The zip codes for these contiguous central city areas were: 43201, 43203, 43205, 43206, 43207, 43209, 43211, 43215 and 43219. Consequently, the *Caring for 2* project focused its efforts in these zip codes.



Caring for 2 Provides:

- In home visiting for pregnant women at high risk for poor birth outcomes such as prematurity and low birth weights.
- Assistance to improve access to healthcare services needed to support healthy pregnancies and improved birth outcomes.
- Promotion of better living conditions such a long-term housing, safety and security.
- Education to reduce risks associated with maternal depression, tobacco use, drug/alcohol use, late prenatal care, and unsafe sleep environments.
- Health education and promotion through and with community partners.
- Encouragement and empowerment of residents to be an active part of the health care system.
- Information to improve access to care and health insurance.

Core Services:

- Outreach and Client Recruitment.
- Case Management, Health Education.
- Depression Screening.
- Consortium.
- Collaboration and Sustainability, and Evaluation.

CARING FOR 2 HEALTH EDUCATION MODEL

The *Caring for 2* Case Management team's home visits are guided by the Partners for a Healthy Baby Home Visiting Curriculum developed by the Florida State University Center for Prevention and Early Intervention and the participant's distinctive health and psycho-social needs. The Partners for a Healthy Baby series helped the team comprehensively address issues of maternal and child health and development within the context of the multifaceted needs of expectant and parenting families.

Health Education Topics

- Safety education – home and car safety: fire, lead, safe sleep, environmental smoking, poison control, car seat and injury prevention;
- Nutrition education –healthy eating on a budget, healthy food preparation with food demonstrations, low cost healthy meals, foods that promote good dental hygiene;
- Self esteem building;
- Oral health – dental screenings and assessments, creating healthy smiles before--during and after pregnancy and at the earliest stages of life, screening infants & children for gum disease & tooth decay;
- Child development – the impact of healthy parental relationships and early childhood education;
- Sexual health, STD's;
- Medicaid HMO health insurance plans;
- Domestic violence – information and screenings;
- Importance of immunizations.



CARING FOR 2 TEAM APPROACH

Caring for 2 uses an interdisciplinary team approach of care coordinators, social workers, and public health nurses to provide in-home family centered services to pregnant and parenting women. Services involve health education and information addressing pregnancy, well women care and infant care. Staff conducts social needs, risk and health needs assessments and provides linkages to services:

- Infant Assessment
- Depression Screening
- Fatigue Screen
- Breast Feeding
- Postpartum Check
- Well Woman Care
- Nutrition
- Parenting Support
- Family Planning
- Child safety
- Child Care
- Well baby check-ups
- Immunizations
- Stress Management
- Health Risk Reduction

Caring for 2 Care Coordinators provide services that include: developing a Care Plan to identify and eliminate barriers in accessing and utilizing health care systems; assisting participants to arrange for prenatal care, health insurance, WIC services, cash assistance, food stamps, safe housing, food and material assistance, transportation, education, job training, legal aid, and other identified needs.

Caring for 2 Public Health Nurses provide services that include: prenatal risk assessment of maternal behaviors and experiences; alcohol use; tobacco use; physical abuse; complications of pregnancy: diabetes, hypertension, etc.; prenatal care and education; postnatal care and education; depression screening and follow-up; baby check-ups; interconceptional follow-up; and maintain medically high risk cases – mothers/infants.

Caring for 2 Social Workers provide services that include: assessing and reassessing social/financial/material needs of participants; assessing mental health concerns; determining risk level of participants; developing individualized service plans and referring for services; providing supported linkages; coordinating case conferences with teams; and maintaining high risk cases exhibiting high psycho-social risk factors.

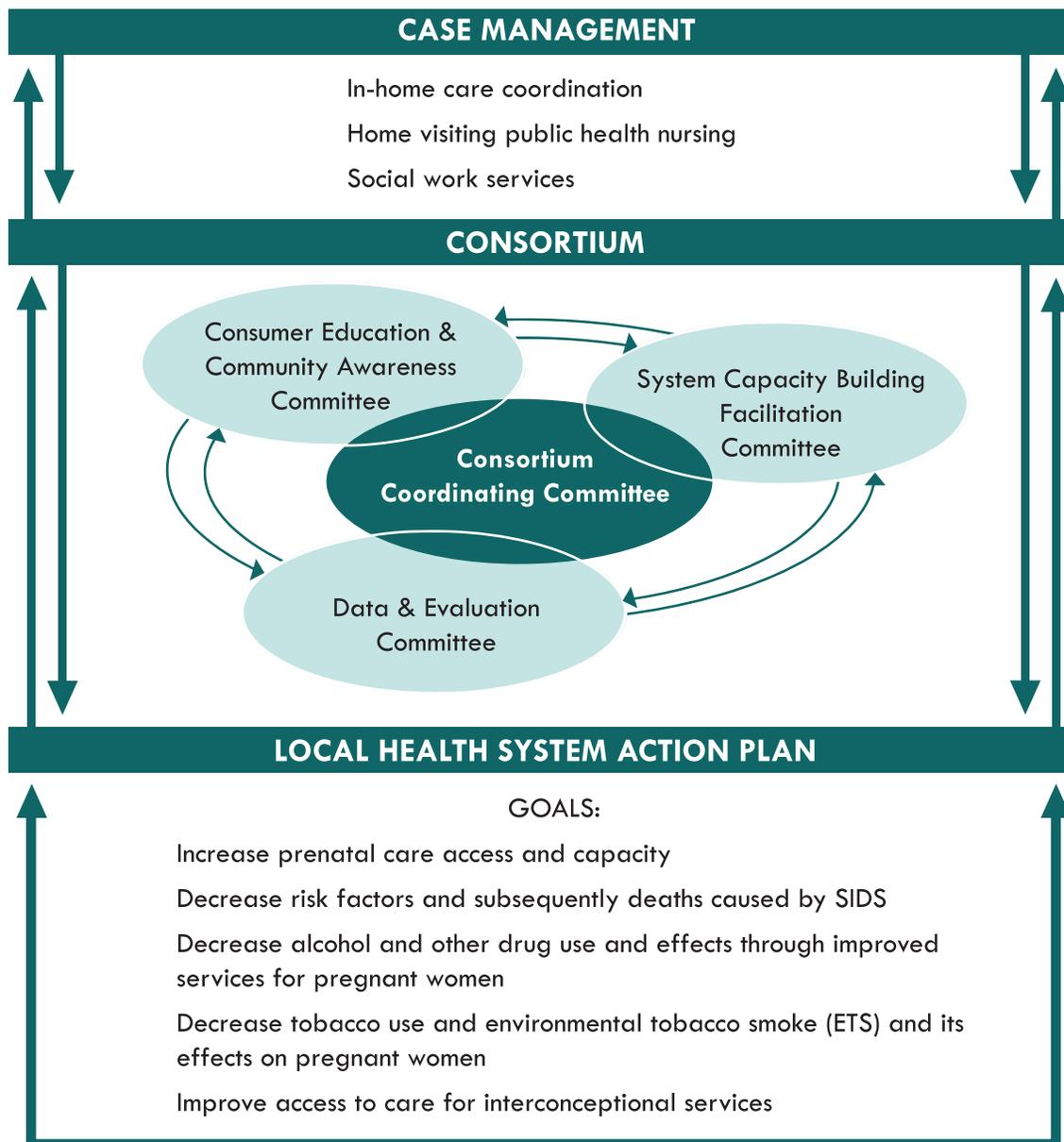


Gabrielle and Phillip with Tyler, born March 28, 2009

INTEGRATED SERVICE DELIVERY PLAN

Caring for 2 provides a formal mechanism for stakeholder representation and participation in the planning and implementation of a coordinated and integrated system of service delivery, closes gaps in services, promotes collaboration among providers, encourages and empowers residents to be an active part of the health care system, and provides consumers, professionals, and the community at large information to improve access to care and health insurance, and improved systems of care.

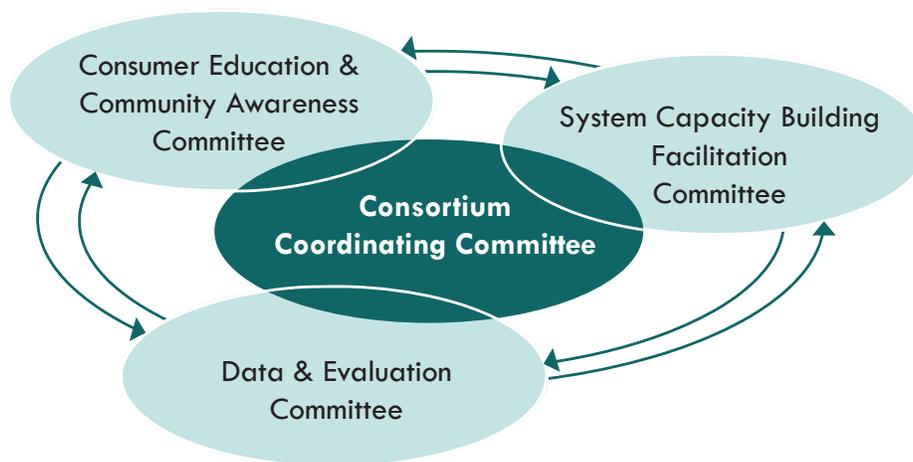
Stakeholders participate on various consortium task forces and committees. When issues affecting our population are encountered in case management, i.e. maternal depression or the impact of racism, our consortium is included in the system plan development.



CARING FOR 2 CONSORTIUM MODEL

The *Caring for 2* consortium model is a formal mechanism for sustaining a community group to impact infant mortality by reducing adverse risk factors and increasing positive prenatal outcomes through planning, implementation, and evaluation of a coordinated and integrated system of service delivery.

Caring for 2's work to eliminate the disparities is accomplished through direct services to enhance the system of care, coordinate consortium activities, and build partnerships with project contractors.



Consumer Education & Community Awareness Committee

Tasks & Functions

- Outreach and recruitment
- Health education and promotion
- Empowerment and informing
- Community education

Data & Evaluation Committee

Tasks & Functions

- Data Collection, Compilation, Analysis and Reporting
- Local Evaluation Plan
- Reports, Presentations and Publishing

System Capacity Building Facilitation Committee

- Health education and promotion initiatives
- Centering Pregnancy initiative
- Prenatal care capacity building roundtables
- Collaborations:
 - Maternal Depression Collaborative
 - Franklin County Infant Safe Sleep and SIDS Reduction Initiative
 - Preconception Collaborative
 - Alcohol and Other Drug (AOD) Collaborative
 - Family Planning Waiver Coalition



Jenae and Jenia, born June 29, 2009

COMMUNITY PARTNERS & CONTRACTORS

The elimination of disparities in infant mortality and reduction in the number of Very Low and Low Birth Weight births requires a communitywide effort, and in the Columbus, Ohio, there is a committed and passionate group of agencies that have partnered with *Caring for 2* in sponsoring events to help provide education, training and services to reduce disparities in access to healthcare and prevent adverse birth outcomes.

Evaluation Support Group (2005-current): *Caring for 2* has an external evaluator for implementing the Local Evaluation Plan with our data analyses and reports, participant surveys and consortium work. The external evaluator is also the chairperson for the *Caring for 2* Data Evaluation committee of our consortium. The Evaluation Group facilitated *Caring for 2* in the development of the case management and consortium logic models.

Council on Healthy Mothers and Babies (2005-current): The council is a major partner in building a Local Health System Action Plan. *Caring for 2* funds partly support Pregnancy Care Connection (PCC a single line where women can call to schedule their 1st PNC appointment), co-sponsorship of conferences, and support for activities of community groups addressing issues identified in our Local Health System Action Plan. The Council provides leadership and support to bring together all PCC providers to continue to identify and address barriers to prenatal care. In addition, the Council supports community solutions in leading local efforts to prenatal care capacity.

JBAR Software, Inc. (2005-current): Provides *Caring for 2* client management system services, technical assistance and system enhancements.

Neighborhood House (NH) and Southside Settlement House (SSSH) (2005-2007): These community settlement houses located in the *Caring for 2* project area provide social work services, Neighborhood Nest and health education classes and events. *Caring for 2* funds helped support Nest operations and incentives and provided support for the major community baby shower and health education sessions. SSSH assisted with establishing the *Caring for 2* Consortium. It facilitated the Consumer Education and Community Awareness committee; conducted participants' education forums and community empowerment events for the Consortium; and provided the logistical support for the Coordinating Council meetings.

DADDS, INC. (2008): *Caring for 2* contracted with DADDS, INC., a non-profit 501(c)3 network, to tailor fatherhood-related training for the *Caring for 2* staff. Training focused on strategies and resources to engage fathers in a healthy birth outcome.

St. Stephen's Community House (2008-2009): A faith based settlement house located in the *Caring for 2* service area, co-hosted a community forum for the purpose of screening and discussing the documentary "Unnatural Causes--When the Bough Breaks". St. Stephen's also lead a *Caring for 2* sponsored communitywide outreach campaign and education initiative, called "Go Ahead Ask Me".

City of Refugee, Point of Impact First Church (2008): A non-profit 501(c)3 faith based organization affiliated with the First Church of God, hosted a *Caring for 2* sponsored women's health and wellness events within the target area for participants and community residents.

COMMUNITY PARTNERS & CONTRACTORS, *continued*

ACTION OHIO (2008-current): A Statewide Coalition For Battered Women- partnered with *Caring for 2* to host and facilitate HRSA’s required 2 days domestic violence technical assistance workshop. This workshop brought together community partners from child welfare, law enforcement and other community partners to gain knowledge and strategies to address the cycles of DV. We are currently collaborating to conduct domestic violence screening, safety planning and referral services as needed for all *Caring for 2* participants.

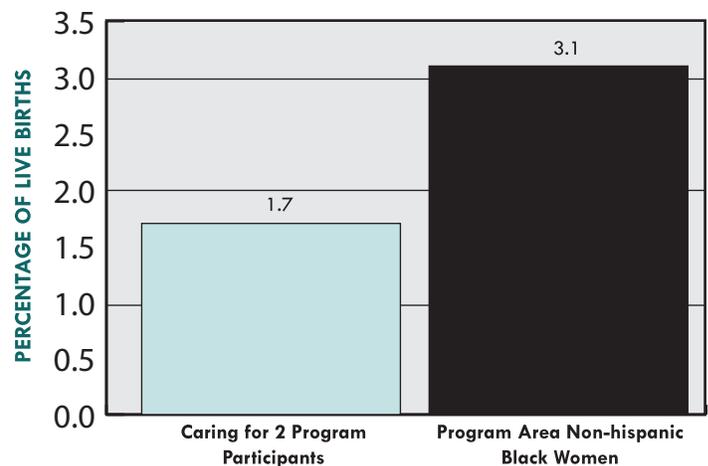
Action for Children (2009-current): A private nonprofit childcare resource and referral agency, contracted to provide health education and learning experiences for pregnant and parenting women enrolled in the *Caring for 2* program and community residents. The also provide committee management and consumer services for the consumer Education and Awareness Subcommittee as well as prepare and accompany a *Caring for 2* participant to the National Healthy Start Association annual conference.

P.O.E.M. (2008-current): A nonprofit organization providing support advocacy and information for mothers and families at risk for experiencing pregnancy and postpartum depression. Partners with *Caring for 2* to co-chair the Franklin County Maternal Depression Task Force which: assisted with the printing and compilation of the Maternal Depression directories and provides awareness and education workshops to providers.

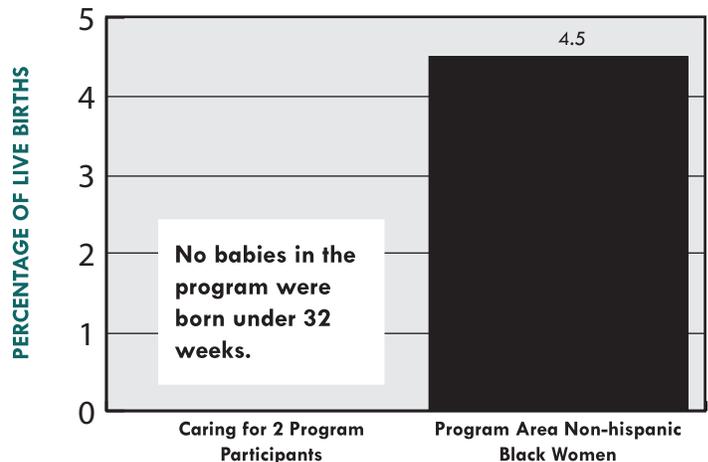
KEY PROGRAM HIGHLIGHTS & STATISTICS

- Served an average of 153 women per year.
- Approximately 9 out of 10 of the participants are single women.
- 1 out of 3 of the participants are teens.
- Most participants (83.4%) have incomes at or below poverty level.
- Nearly 3 out of 4 (72%) participants entered prenatal care by their first trimester.
- 268 babies, including 12 sets of twins, have been delivered.
- Almost 3 out of 4 (72%) participants delivered infants vaginally; 28% delivered via C-section.
- No infant deaths occurred for participants who enrolled in their first trimester from 2005-07.

Caring for 2 Participants: 2008
VERY LOW BIRTH RATE RESULTS

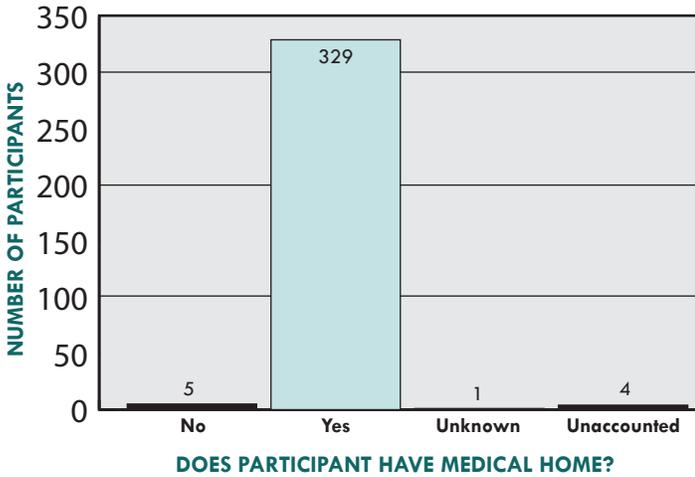


Caring for 2 Participants: 2008
**VERY PRETERM BIRTH RATE RESULTS
(UNDER 32 WEEKS GESTATION)**

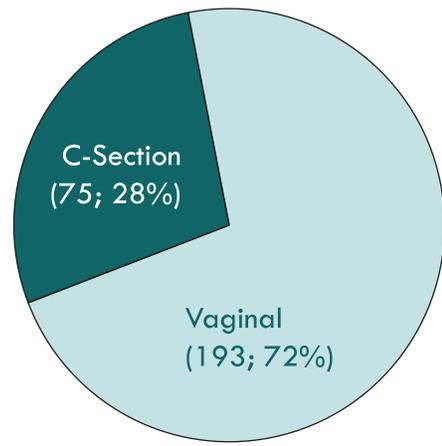


KEY PROGRAM HIGHLIGHTS & STATISTICS, *continued*

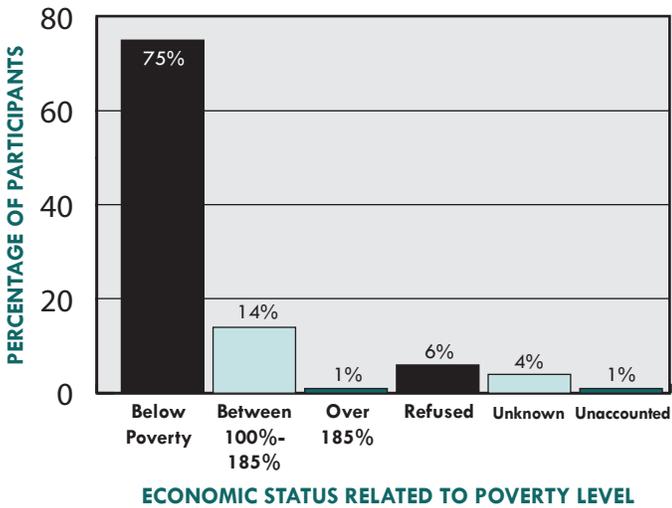
Caring for 2 Participants: 2005-2009
MEDICAL HOME STATUS



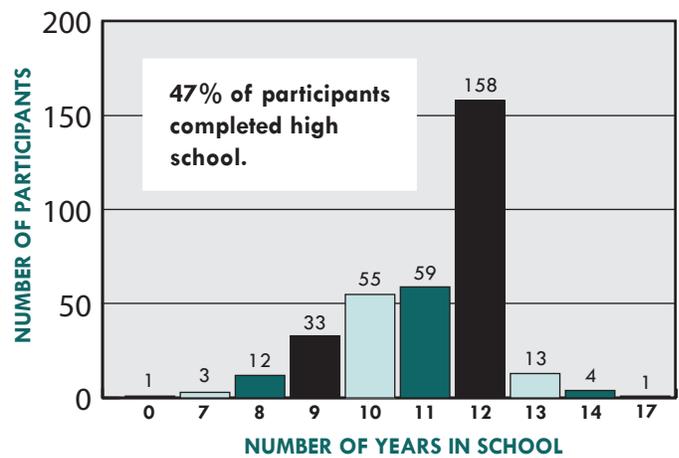
Caring for 2 Participants Birth Results: 2005-2009
TYPES OF DELIVERIES



Caring for 2 Participants: 2005-2009
ECONOMIC STATUS



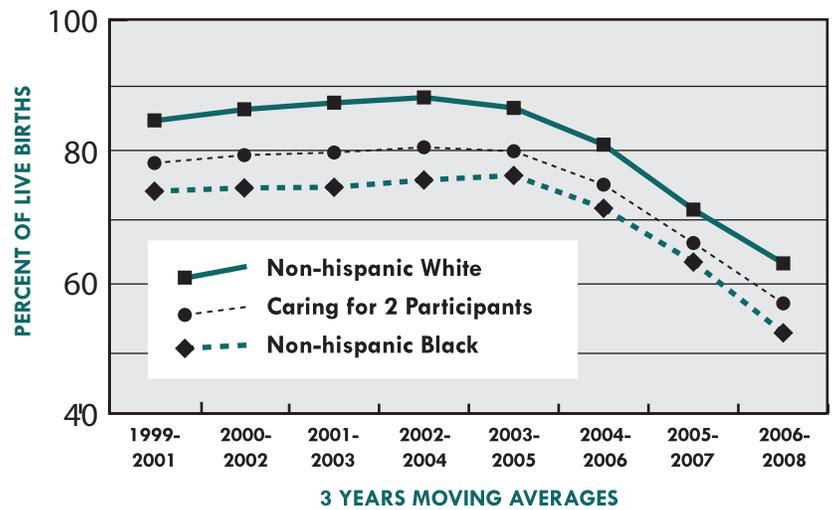
Caring for 2 Participants: 2005-2009
EDUCATIONAL STATUS



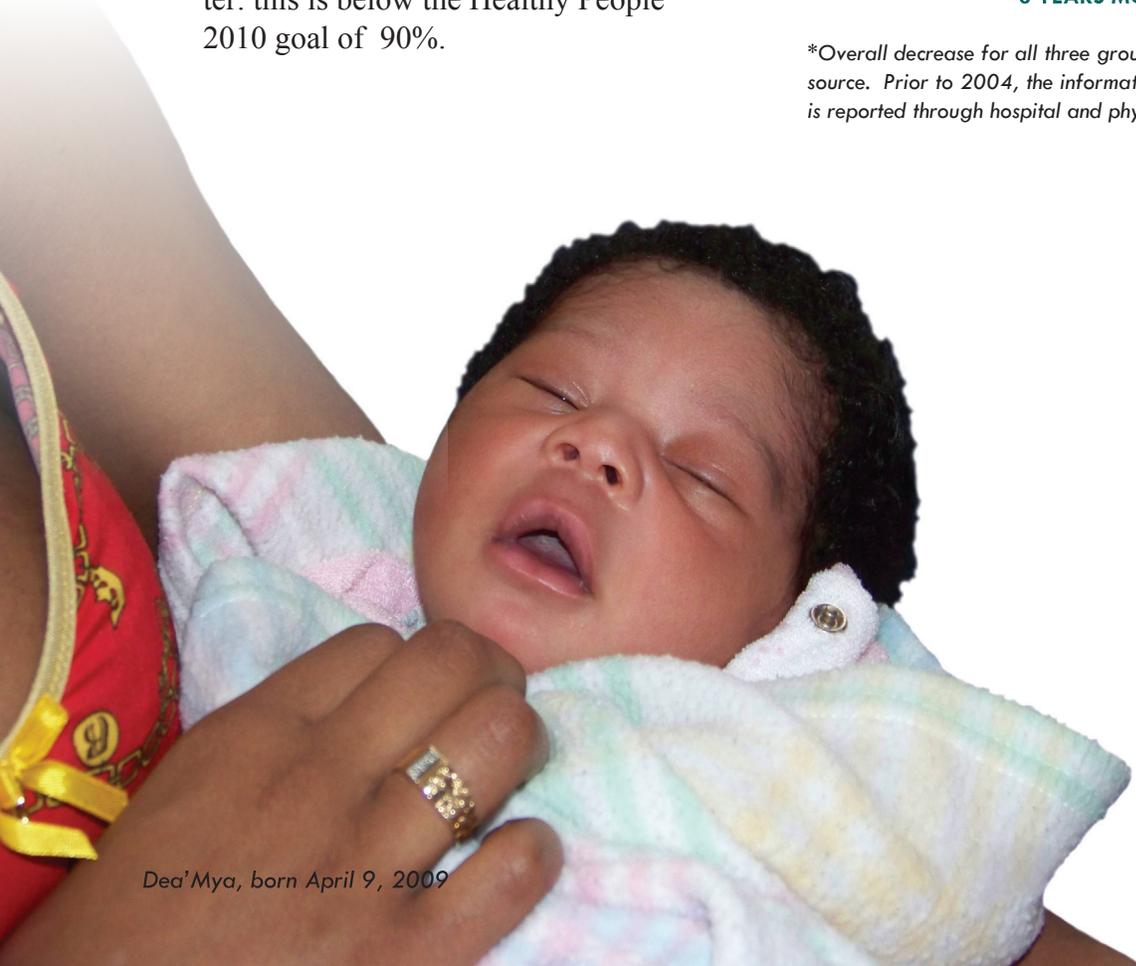
WHY CARING FOR 2 IS CRITICAL

- 164 babies die before their 1st birthday in Franklin County (2006).
- Disparity of infant deaths between blacks and whites is 2½ fold.
- Prematurity/low birth weight is the second leading cause of infant deaths and the leading cause for black infants (US).
- Black women, under 17, over 35, those with low income, and less education are all at increased risk for having a low-birth weight baby.
- Women who are single, with less education or lower income are more likely to have late or no prenatal care.
- Unsafe sleep environments is a leading cause of death for all infants. Safe sleep is an important component of *Caring for 2* health education.
- 74.1% of *Caring for 2* mothers enter prenatal care in their 1st trimester: this is below the Healthy People 2010 goal of 90%.

Caring for 2 Project Area: 1999-2008
1ST TRIMESTER ENTRY INTO PRENATAL CARE*



*Overall decrease for all three groups is attributed to a change in data source. Prior to 2004, the information was client reported and after 2004 it is reported through hospital and physician's records.



Dea'Mya, born April 9, 2009

WORDS FROM OUR CONGRESSIONAL REPRESENTATIVES IN SUPPORT OF FIVE YEAR CONTINUATION GRANT

Senator Sherrod Brown

“Healthy Start provides critical services to families across Ohio,” Sen. Sherrod Brown (D-OH), a member of the Senate Health, Education, Labor and Pensions Committee said. “The program ensures safe pregnancies and helps some of our nation’s most underserved children live longer, healthier lives. If we’re going to fix health care, we need to invest in preventive services that lead to positive health outcomes. The Healthy Start program does just that – it helps improve medical outcomes and contain health care costs.”

Representative Mary Jo Kilroy

“As a mother of two children, I understand the importance of providing new mothers with the best care to ensure healthy pregnancies and healthy births. I am proud to support Hearty Start which has provided the Columbus Public Health *Caring for 2* program with the funding it needs to provide new moms with the proper pre-natal care and continue to support them and their children for up to two years,” said Kilroy.

Representative Patrick Tiberi

“Programs that provide mothers the tools and knowledge they need for a healthy pregnancy gives children a better beginning to their lives are commendable because all children deserve a healthy start.”

Senator George Voinovich

“One of my top priorities as Ohio’s Governor was investing in the health needs of pregnant women and children,” said Senator George V. Voinovich. “The *Caring for 2* Program continues to be a leader in our community through its services to ensure healthy birth outcomes for women - I commend you for your diligent work in helping to reduce the infant mortality rate in Ohio.”



Will and Deonna Wess with Larryah, born May 28, 2009

SATISFACTION RATES AND TESTIMONIALS FROM CARING FOR 2 PARTICIPANTS

KIMBERLY

Kimberly was referred to the *Caring for 2* program by a social worker during a prenatal appointment when she was seven months pregnant. She had a Bachelor degree from Ohio State University, but had been unable to secure a job. Her Care Coordinator assisted her with applying for public assistance, health insurance, job search, and obtaining housing. Our Care Coordinator provided Kimberly with health education and resources that emotionally prepared her for the birth of her first child. Being a first time mom, she was nervous. She delivered a full term baby girl. She now has a job and her baby is doing well.

NISE

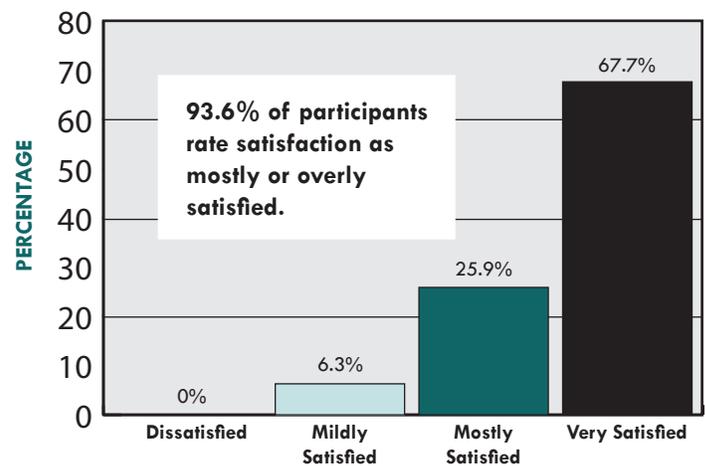
Nise stated she always received support and encouragement from the *Caring for 2* program. She praised the *Caring for 2* team for supporting not only her goal to have a healthy baby and family but her personal goal as well to obtain her GED. "This relationship helped me make the decision to parent my adorable little. Johnetta has been both a blessing and a bundle of joy in my life".

TOYA

Speaking as a Caring for 2 Mom...
 "My name is Toya and I became a participant of the *Caring for 2* program at the age of 23. I was pregnant and has no clue on what challenges I was to face as a new single mother. Although life circumstances maybe hard, *Caring for 2* will step in with support, resources and relief. This program has molded me into a very wise and independent young woman who has gained the ability to care for her son and make it as a single parent".

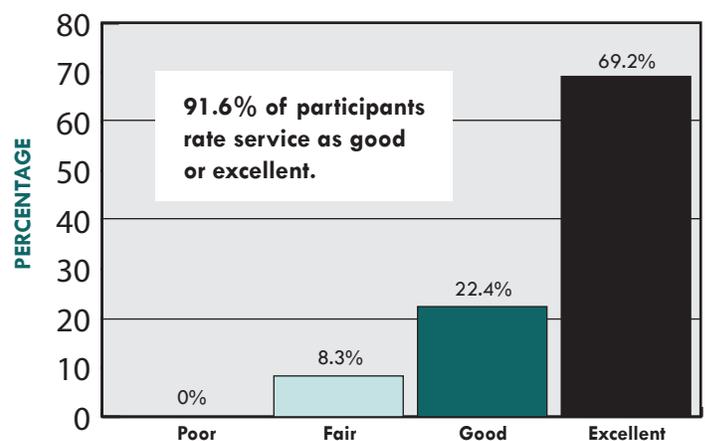
Toya was hired by CPH MCH as a temporary Care Coordinator in the Pregnancy Support Services Program

SELF-REPORTED SATISFACTION



SATISFACTION RATING OF PROGRAM

QUALITY OF SERVICE RATING



RATING OF SERVICE

CARING FOR 2 PROGRAM CONTACT & FUNDING INFORMATION



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Caring for 2 is a program of the Columbus Public Health Department

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