Becoming pregnant and giving birth are exciting times in the lives of women, but they can also be scary times, particularly for teen mothers and women lacking financial resources. The period before birth and the 36 months after birth are critical to a baby’s development. However, many women are forced to face the realities of motherhood alone, and their children can suffer as a result.

No mother should have to walk through these critical times alone. That is why the Clayton County Board of Health implemented the Making Our Mothers Successful (MOMS) program.

MOMS is a unique program that employs trained home visitors to come into the homes of women and help guide them through the nuances of early motherhood. Using Resource Mothers® and Parents as Teachers® (PAT) Born to Learn® — evidence-based curricula proven to improve outcomes for mothers and their children — MOMS home visitors establish bonds with young families, assess the safety of their living environment, and teach young mothers valuable parenting skills. Services offered by the MOMS program include:

- Breastfeeding education and assistance
- Nutrition education and assistance
- Home/crib safety assessments
- Sudden Infant Death Syndrome (SIDS) education
- Healthcare referrals for mother and infant health referrals for baby
- Infant carrier and child car seat education workshops
- Education and assistance regarding violence and domestic abuse
- Clothing and referral for financial assistance
- Access to dental care
- Referral (if necessary) to smoking and drug cessation programs
- Developmental screening for infants and children up to age five.

With MOMS, more children can grow to live happy, healthy lives. Pregnant teenagers, women who have delivered a low-birth-weight baby (less than 2500 grams or 5 lbs., 8 oz.), and African American women between the ages of 30 and 44 who are pregnant or have recently delivered, all qualify for MOMS program services.

Parents as Teachers® (PAT) founded in 1984, is a nationally recognized, evidence-based home visiting program shown to improve the outcomes of mothers and their children between the ages of 0-3 at risk for developmental delays. Fully-integrated into the range of MOMS program services, PAT provides information, support, and encouragement to parents to help their children develop optimally during the crucial early years of life.

Through child need assessments, developmental progress evaluations, and one-on-one parenting skills training, the curriculum has been proven to: increase parental knowledge of early childhood development and improve parenting practices; provide early detection of developmental delays and health issues; prevent child abuse and neglect; and increase a child’s school readiness and school success.

Whereas typical MOMS program services offer assistance to parents until their child is 12 months old, PAT provides services to families until children reach 36 months of age. In order to address the areas and populations of Clayton County with the highest low birth weight rates, this additional layer of preventive services is open to pregnant African-American women between the ages of 25-44 in their first trimester, residing in the 30236 (Jonesboro), 30238 (Jonesboro), and 30274 (Riverdale) ZIP codes.
POOR BIRTH OUTCOMES are a complex problem influenced by a variety of biological and environmental factors. Lack of prenatal care and poor nutrition can contribute to low birth weight and premature birth, while drug abuse and socioeconomic factors in a parent’s life can contribute to birth defects and lifetime illnesses in their children. Any combination of negative factors can lead to stillbirth and early death in children.

The focus of Making Our Moms Successful (MOMS) is to improve birth outcomes by making perinatal health resources available to mothers from the comfort of their homes.

The infant mortality rate (IMR) — the total number of deaths of infants between the ages of 0-12 months per 1,000 live births — is an accepted measure of overall community health. For the last 10 years, Clayton County’s IMR has been consistently higher than the state average. The IMR of a particular community can be a telling sign of the existence or lack of perinatal health services, the accessibility and effectiveness of existing health programs, and the level of public education around health issues. In Clayton County, teen mothers and children born to African American females continue to have consistently negative birth outcomes, and thus are the focus of intervention programs offered by MOMS.

Things you should know about premature birth

- Young African American women run the greatest risk of having children who are born premature.
- Prematurity is the leading killer of American newborns.
- Babies who survive prematurity often have lifelong health problems, including cerebral palsy, mental retardation, chronic lung disease, blindness, and hearing loss.
- Recent studies suggest that premature babies may be at increased risk for symptoms associated with autism, including social, behavioral, and speech problems.
- Babies born very prematurely may have an increased risk for certain adult health problems, such as diabetes, high blood pressure, and heart disease.

While there is no single cause of infant mortality, the Making Our Mothers Successful (MOMS) program can help women avoid high-risk pregnancies and infant death by:

- Educating young women about reproductive health through family planning/preconception health programs.
- Encouraging pregnant women and those contemplating pregnancy to get regular dental examinations to help prevent, detect, and/or treat periodontal disease.
- Making women aware of violence issues during pregnancies and making referrals to appropriate intervention programs.
- Making referrals to comprehensive prenatal care providers and providing access to preconception health evaluations, smoking cessation programs, stress counseling and reduction programs, and nutrition assistance and education.
- Collaborating with health providers, schools, community organizations, local businesses, and places of worship to develop outreach and educational materials emphasizing perinatal health.

**Infant Mortality and Neonatal Mortality Rates by Race for Clayton County, 2006-2008**

<table>
<thead>
<tr>
<th>Race</th>
<th>Infant Mortality Rate</th>
<th>Neonatal Mortality</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>9.1</td>
<td>5.2</td>
</tr>
<tr>
<td>Black/African American</td>
<td>10.8</td>
<td>6.3</td>
</tr>
</tbody>
</table>

Source: Online Analytical Statistical Information System (OASIS) Georgia Department of Public Health, Office of Health Information and Policy (OHIP)

**Leading Causes of Infant Death Clayton County, 2006-2008**

<table>
<thead>
<tr>
<th>Cause</th>
<th>Number</th>
<th>Rate*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fetal and Infant Conditions</td>
<td>74</td>
<td>4.9</td>
</tr>
<tr>
<td>Birth Defects</td>
<td>19</td>
<td>1.2</td>
</tr>
<tr>
<td>SIDS</td>
<td>17</td>
<td>1.1</td>
</tr>
<tr>
<td>External Causes</td>
<td>8</td>
<td>0.5</td>
</tr>
</tbody>
</table>

*Rate is per 1,000 live births.

Source: Online Analytical Statistical Information System (OASIS) Georgia Department of Public Health, Office of Health Information and Policy (OHIP)
PROBLEMS
- High teen pregnancy rates
- High rates of fetal-infant mortality
- Perinatal health disparities
- High rates of STIs
- Unhealthy behaviors
- Poor preconception health
- Low rates of immunizations

SUB-PROBLEMS
- Lack of transportation system
- Lack of access to preconception health services
- Single central health center
- Lack of local data to monitor health status
- Lack of affordable primary care services
- Lack of perinatal health funding

GOALS
- Decrease low birth weight births
- Decrease rate of SIDS
- Decrease rate of premature births
- Decrease the number of teen births and repeat births
- Decrease the percentage of unintended or unwanted pregnancy
- Reestablish internal infrastructure and external community capacity to support Maternal and Child Health initiatives

OBJECTIVES
- Increase information sharing across programs and organizations
- Decrease the number of residents seeking services outside of the county by strengthening the county’s system of care
- Decrease barriers to care and increase access to services
- Improve the quality of service delivery
- Increase outreach and education in the community

ACTIVITIES
- Provide home visiting services for at-risk populations
- Provide structured activities for at-risk populations promoting knowledge related to parenting and child development
- Establish partnerships with local community health centers
- Strengthen referral systems within CCBOH
- Increase the amount of direct services provided
- Continue to assess barriers to providing services
- Seek additional funds to sustain programs
- Conduct needs assessments and implement action plans
- Collaborate with other community organizations to provide ongoing health education
- Provide support for breastfeeding initiatives throughout the county

OUTPUT MEASURES
- Increase the number of family planning clients receiving preconception health screening and assessment, counseling, and referrals
- Increase the number of prenatal women receiving WIC services during the first trimester
- Increase the number of pregnant teens receiving home based pregnancy and newborn care support services
- Increase the number of women with an infant born of low birth weight receiving interconception care services
- Increase the number of women of childbearing age receiving family planning services

OUTCOME MEASURES
Client Level:
- Improve parents’ knowledge of age-appropriate developmental milestones
- Improve parents’ knowledge of parenting skills, healthy parent-child interactions, child development, and community resources
- Improve child’s health, cognitive abilities, motor skills, and social-emotional development
- Increase the number of women taking a multiple vitamin (with folic acid)
- Increase the number of women spacing their births by at least 24 months
- Increase the number of women initiating breastfeeding

Organization Level:
- Build local public health capacity to monitor county-level maternal and infant health needs and key indicators
- Integrate the system of care for pregnant women and their infants receiving services from CCBOH programs

Community Level:
- Increase community and provider awareness of poor birth outcomes and its impact on Clayton County
- Increase the number of providers (public and private) offering preconception health screening/assessment, counseling, and referrals to women of childbearing age

LONG-TERM OUTCOMES
- Decrease the black / white infant mortality gap
- Decrease pregnancies among girls ages 15-17
- Reduce health risks for women of childbearing age
- Decrease the number of low birth weight infants
The Making Our Mothers Successful (MOMS) program is always looking for volunteers from the community to assist with our numerous efforts and projects. With a simple gesture of offering your skills, resources, and enthusiasm, you will positively impact the lives of others, as well as your own.

Businesses, health and wellness-related organizations, and nonprofits can help MOMS by:
• Volunteering to speak at one of MOMS’ regularly-scheduled educational workshops
• Hosting a MOMS child car safety educational workshop or “safety check” event
• Partnering with MOMS to develop new outreach programs for young and expectant mothers

As an individual, you can help MOMS by:
• Volunteering your expertise during a MOMS workshop or seminar
• Sharing information about MOMS with your co-workers, especially those who are pregnant and/or fall into high-risk categories
• Making a donation of gently used baby clothing to the MOMS Boutique

We Need You!

The MOMS program needs community support to develop more outreach and educational programs that emphasize women’s health and can be used in schools, community organizations, local businesses, and places of worship. As a community partner, you can make a positive change in the community by helping lower the infant mortality rate in Clayton County. For more information, contact the MOMS Outreach Coordinator at 678-610-7298.

If you would like to receive more information regarding MOMS program or any other Clayton County Board of Health initiatives, please detach this form, fill it out, and mail it to: Clayton County Board of Health, Attn: MOMS Program, 1117 Battle Creek Road, Jonesboro, GA 30236.

Name/Title: _________________________________________________________________
Organization: ________________________________________________________________
Phone number: _______________________________________________________________
Email address: ________________________________________________________________
Address: ____________________________________________________________________

Reason(s) for interest in the MOMS program _______________________________________
___________________________________________________________________________
___________________________________________________________________________

With your cooperation, the CCBOH will lower the infant mortality rate and prevent more babies from being born too sick, too small, and too soon.

For more information about how to become a partner, contact: Clayton County Board of Health at 678-610-7199.

Weke Need You!

Clayton County Perinatal and Infant Health Coalition

In an effort to develop a long-term strategy to improve Clayton County’s infant mortality rate and decrease the number of infants born low birth weight (LBW, less than 5lbs, 8oz) or very low birth weight (VLBW, less than 3lbs, 5oz), the Clayton County Board of Health (CCBOH) has established the Clayton County Perinatal and Infant Health Coalition.

Through regular meetings and work sessions, members of the coalition discuss the impact of poor birth outcomes on families and the community, and share insights regarding strategies that may be useful in tackling our county’s perinatal/infant health issues.

For more information about joining the coalition, contact 678-610-7298.