

Perinatal and Infant Health Coalition Launch Meeting

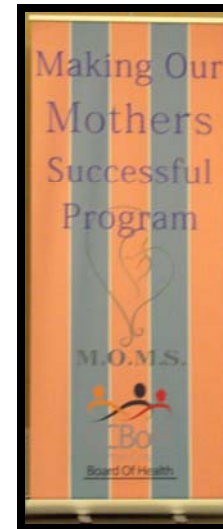


August 17, 2011



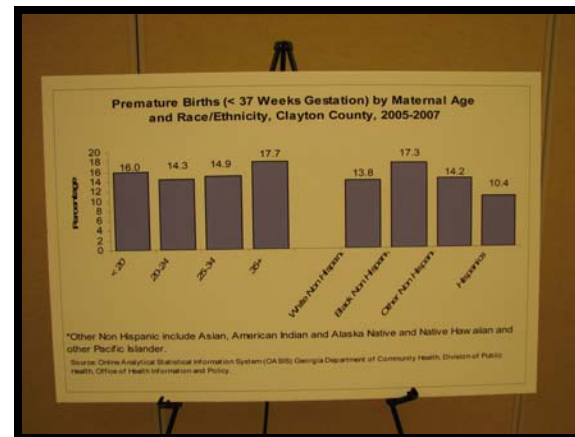
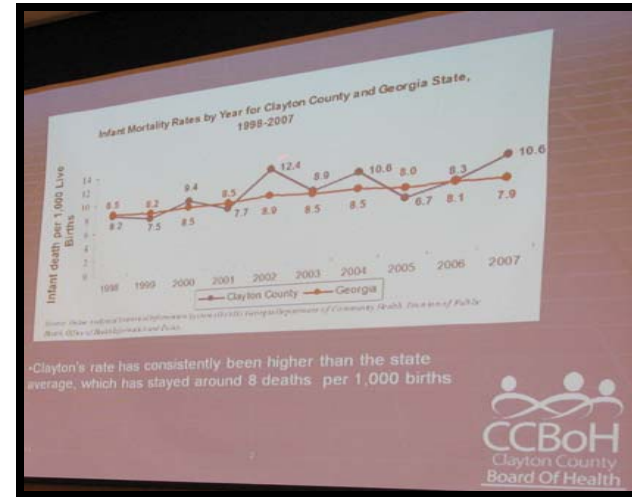
Overview

- 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), in collaboration with the Clayton County Collaborative Authority, Inc., launched the Clayton County Perinatal and Infant Health Coalition.
- The coalition's kickoff meeting was held on August 17, 2011 at the Morrow Center (at Southlake Mall near Atlanta).
- During the launch, the CCBOH shared current county-wide data on infant mortality and poor birth outcomes, discussed the proposed approach to the coalition's work, and encouraged stakeholders and partners to assist in developing a long-term strategy for improving the county's infant mortality rate.



Objectives

- The primary objectives of the meeting were to:
 - Present county-wide data on infant mortality and poor birth outcomes
 - Discuss the impact of infant mortality rates and other poor birth outcomes on families and the community
 - Share insights regarding strategies that may be useful in tackling perinatal/infant health issues
 - Provide an overview of the proposed approach to the coalition's work
 - Invite stakeholders and partners to assist in developing a long-term strategy for improving birth outcomes



Coalition Members

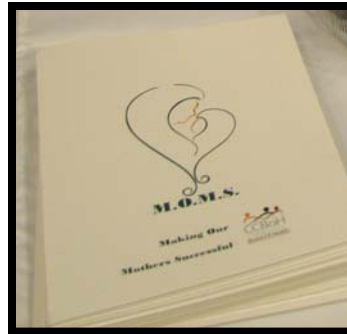
- Members of the Perinatal and Infant Health Coalition include:

- CCBOH
- Clayton County Collaborative Authority, Inc.
- Emory University
- The March of Dimes
- United Way of Metropolitan Atlanta
- Southern Regional Medical Center
- House of Dawn



Meeting Attendees

- Meeting attendees included:
 - 27 internal partners
 - 17 external partners
- Those in attendance received a meeting packet and several program promotional items.



Speakers

- Speakers at the coalition launch included:
 - **Alpha Fowler Bryan, MD**
District Health Director
Clayton County Board of Health
 - **Fleda Mask Jackson, PhD**
Professor
Emory University, Rollins School of Public Health
 - **Jackie Lawson**
Director of Women and Children Services
Southern Regional Medical Center (SRMC)
 - **Taralyn Keese**
Program Director
House of Dawn
 - **Twanna Nelson**
Health Educator/Outreach Coordinator
Clayton County Board of Health
 - **Susan Webster**
WIC Nutritionist
Southern Regional Medical Center,
Clayton County Board of Health



Birth Outcomes

- According to the World Health Organization, one of the best measures of a community's quality of life is its infant mortality rate. With this point as a frame of reference, Dr. Bryan Presented an overview of Clayton County birth outcomes data.
 - Between 1998 and 2007, there were 907 fetal and infant deaths in Clayton County, and 8 maternal deaths.
 - In Clayton County, each year approximately 41 babies do not live to see their first birthday; instead they die from health problems, birth complications, birth defects, poverty, living conditions, injuries, inadequate care, infections, Sudden Infant Death Syndrome and more.
 - Clayton County has one of the highest infant mortality rates in the state.
 - Clayton County had a higher rate of premature births (15%) compared to the state rate (14%) (2005 – 2007).
 - Premature births are highest in Black women (17%) and in women age 35 and older.
 - Low Birth Weight (LBW) babies increased from 9% to 11% FROM 1998 – 2007.

Birth Outcomes

- Very Low Birth Weight (VLBW) babies increased from 2.1% to 2.7% from 1998 – 2007.
- Infant Mortality Rates (IMR) increased 29% (8.2% to 10.6%) from 1998 – 2007.
- Neonatal Mortality Rate (NMR) increased 3% (6.3 to 6.5%) from 1998 – 2007.
- In 2007, Clayton's fetο-infant mortality rate was 13 deaths out of every 1,000 births while Georgia's fetο-infant mortality rate was 10 deaths out of every 1,000 births.
- Rate of SIDS deaths in Clayton County Black infants is 1.8 compared to 1.0 for White infants (2005 – 2007).
- The leading causes of infant deaths from 2005 – 2007 were:
 - Fetal and infant conditions (premature, respiratory distress, etc.)
 - SIDS and
 - Birth defects.

Birth Outcomes

- Premature birth is the number-one killer of newborns.
- Premature babies cost ten times more than healthy babies.
- Premature birth costs society more than \$26 billion a year.
- It costs approximately \$200,000 for an extended NICU stay for a premature baby.
- The average cost of medical care for a premature or low birth-weight baby during its first year of life is about \$49,000, according to a new report from the March of Dimes Foundation. By contrast, a newborn without complications costs \$4,551 for care in its first year of life.
- Newborns with other kinds of complications, such as congenital defects, have medical expenses of \$10,273 on average in the first year of life.

Keynote Speech

- Fleda Mask-Jackson, PhD delivered the keynote speech titled ***A Once in A Lifetime Opportunity: Why You Must be Involved in This Initiative.*** Dr. Mask-Jackson introduced the topic of health inequities as an underlying cause of Black infant mortality rates by showing a video clip title *When the Bough Breaks*, which was featured on PBS.
- Dr. Mask-Jackson provided an overview of her sociological research that identifies stress and the effects of racism as major contributors to the Black infant mortality rate in the U.S.



Coalition Next Steps

- Twanna Nelson, Health Educator/Outreach Coordinator for Clayton County Board of Health, provided an overview of the upcoming work of the coalition, including a brief description of the approach to be used:
 - Identify long-term strategies and solutions that can be used to reduce the number of fetal and infant deaths in our county
 - Get the message out into the community about our perinatal health challenges and how we propose to address them
 - Staff support will be provided to gather data, conduct best practices literature reviews, and assist with any assignments that might be made
 - A trained facilitator will assist in maintaining focus on the core work and achieving positive meeting outcomes
- The coalition's work will build upon a solid foundation that has already been established by other programs such as the Clayton County M.O.M.S. Program.

Special Presentation

- A highlight of the meeting included the presentation of an **Angel Ride™ Car Bed** from CCBOH to Southern Regional Medical Center (SMRC) in recognition of the hospital's work to improve birth outcomes within Clayton County. Eventually 300+ Angel Beds will be given to SRMC to promote safe infant transport.
- Infant carriers that are widely available to parents may not be suitable for low birth weight and very low birth weight babies, so providing car beds allows families to transport infants safely until they are able to properly fit in a regular infant carrier.
- Babies born that small may also have medical conditions, such as respiratory difficulties, which may require them to travel flat in a car bed, which is not permissible with typical infant carriers.



Pledge

- At the close of the meeting, all participants followed Dr. Bryan down a path line with pink and blue child-sized footprints and signed his or her name to a **Pledge of Commitment** affirming their promise to “Assist in identifying strategies and developing solutions to decrease the number of fetal and infant deaths in our community over the next five years.”



Clayton County Board of Health
Perinatal and Infant Health Coalition

Pledge of Commitment

Whereas, the Clayton County Board of Health has a vision of “A healthy Clayton in one generation”; and

Whereas, unaddressed perinatal and infant health issues result in too many of our babies being born too soon, too sick, and too small; and

Whereas, there were 494 fetal and 413 infant deaths from 1998 to 2007 in Clayton County; and

Whereas, it takes the county’s healthcare providers, partners, families and citizens working collaboratively to stem the tide of fetal and infant deaths; and

Whereas, time is of the essence for raising healthy Clayton children in one generation; and

Whereas, the time to act is *now*;
Be it, therefore, known that we, the undersigned members of the Clayton County Infant and Health Coalition, do enthusiastically and wholeheartedly pledge our commitment to assist in identifying strategies and developing solutions to decrease the number of fetal and infant deaths in our community over the next five years.

Launch Meeting of the Clayton County Perinatal and Infant Health Coalition, held Wednesday, August 17, 2011.

_____, Director of Health

Coalition Members:

<u>Name</u>	<u>Organization/Affiliation</u>
_____	_____
_____	_____
_____	_____

Summary

“In 2007, Clayton County’s overall infant mortality rate spiked to 10.6 deaths out of every 1,000 births from 8.3 deaths per 1,000 births the previous year. While Clayton’s rate is slowly stabilizing, it has consistently been higher than the state average, which has remained around 8 deaths per 1,000 births.”

“Too many babies in Clayton are born too small, too sick, or too soon. In recent years, the Clayton County Board of Health has worked closely with the Georgia Department of Public Health’s Office of Health Information and Policy to determine the areas in Clayton where people are experiencing the highest number of infant deaths. This coalition will allow local stakeholders to share strategies that may be useful in tackling perinatal and infant health issues.”

Alpha Fowler Bryan, MD
Clayton County Board of Health