Contra Costa County
Fetal Infant Mortality Review Program

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“All members of a community are affected by the poor health status of its least healthy members. Infectious diseases, for example, know no social/ethnic or socioeconomic boundaries.”
Presentation Objectives

After today’s presentation, you will be aware of Contra Costa FIMR’s most recent program objectives:

- Identification of which women have the highest risk for fetal and infant death
- Identification of the social determinants of health (risk factors) associated with adverse birth outcomes of African American women
- Implementation of a fetal/infant loss intervention and linkage to women for Contra Costa post-loss services
- Community Action

CONTRA COSTA HEALTH SERVICES
CC FIMR Program

- Interconception Care model aimed at reducing racial inequities in birth outcomes.
- Focuses on organizational change in order to create a system to better serve women at risk for adverse birth outcomes by:
  - Promoting ‘best’ practices
  - Educating providers
  - Fostering coalitions and collaboratives throughout Contra Costa County
Through the CC FIMR case review process, FIMR has identified a number of factors associated with a woman’s risk of experiencing poor birth outcomes, such as:

- Being African American
- Obesity
- Marital status
- Partner abuse
- Isolation
- Substance abuse
- Unintended pregnancy
- Pre-term labor
- Pre-existing medical conditions
- History of previous poor birth outcomes
- Unstable housing
What is Health?

- A state of well-being with physical, emotional, mental, and spiritual dimensions that serves as an essential foundation for human life with implications for how all other aspects of life are pursued and evolve.

- An essential resource to be valued by individuals, families, communities, and our larger global community.

- Health may vary in how it is defined, qualified, and pursued within diverse communities and for individuals.

Barbara C. Wallace, PhD (Toward Equity in Health, 2008)
Health inequities refer to material, social, gender, racial, incomes, and other social and economic inequalities that are beyond the control of individuals and are therefore considered unfair and unjust.

Health Canada, Population & Public Health Branch

Health inequities are differences in health status and mortality rates across population groups that are systemic, avoidable, unfair and unjust... and arise from racial and class based inequities.

Adapted from Margaret Whitehead and Unnatural Causes
The social determinants of health are the conditions in which people are born, grow, live, work, and age, including their experience in and access to the health care system.

Circumstances are shaped by the distribution of money, power, and resources at global, national, and local levels, which are themselves influenced by policy choices.

World Health Organization (WHO)
Health equity means fairness and justice in efforts to achieve the best possible health for everyone, especially for those groups who have systematically faced greater obstacles to being healthy through social disadvantage, discrimination, or marginalization.
Life Course Perspective & Prenatal Care

- A way of looking at life not as disconnected stages, but as an integrated continuum

- Prenatal care alone is not sufficient to produce improved birth outcomes.

- In order to improve birth outcomes, interventions must address health equity and the social determinants of health.
African Americans had the **highest** rate of low birth weight infants.

Low Birth Weight (per 1,000 live births) by Race/Ethnicity, Contra Costa County 2005-2007

- White: 6
- Hispanic: 5.7
- Asian/Pacific Islander: 7.3
- African American: 12.4
- CCC Overall: 6.7

Source: Community Health Indicators for Contra Costa County, 2010 edition
**Is it Genetics or Social Determinants of Health?**

**No!** Black women born in Africa and the Caribbean have lower LBW rates than U.S.-born black women.

**Yes!** Something about the pre-pregnancy experiences of U.S.-born black women is detrimental to their pregnancy outcomes.

Parthasarathy, 2010
Fetal Deaths (per 1,000 live births plus fetal deaths) by Race/Ethnicity, Contra Costa County 2005-2007

Note: The fetal death rate includes deaths occurring 20 weeks after conception but before birth.

[Bar chart showing rates for White, Hispanic, Asian/Pacific Islander, African American, and CCC Overall. The rates are: White 5.1, Hispanic 4.9, Asian/Pacific Islander 4.5, African American 11.9, CCC Overall 5.7.]

CCC infant mortality rate was lower than the state of California. On average, there are 77 fetal deaths per year.

Source: Community Health Indicators for Contra Costa County, 2010 edition
Infant Deaths (per 1,000 live births) by Race/Ethnicity, Contra Costa County 2005-2007

Note: Infant deaths are deaths to live-born babies younger than 1 year old.

On average, there are 58 infant deaths per year.

Source: Community Health Indicators for Contra Costa County, 2010 edition
Interconception Care Practices & Take Home Messages

- Folic Acid
- Oral Health
- Birth Spacing
- Perinatal Depression & Anxiety (Mental Health)
Steps-to-Take In Order To Incorporate CC FIMR Into Your Current Practice

- Suggestions for Providers Following a Fetal or Infant Loss
- Referral form to the Contra Costa Crisis Center (CCCC)
- Explained CCCC process
AA Community Baby Shower
Saturday May 21, 2011

Saturdays, May 21, 2011

AFRICAN-AMERICAN COMMUNITY BABY SHOWER

Fathers are encouraged to attend.

Are you pregnant?
Have an infant?
Need support for your newborn?
This is the event for you.

Food, Child Care, Games, Gifts, Resources.
Everything Free!

TIME: 10AM-3PM

Nevin Community Center
598 Nevin St., Richmond

Sponsors Contra Costa County African American Health Initiative (AAHI) in collaboration with Opportunity West and the City of Richmond Recreation Department.

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