

Taking the First Steps: Experiences of Six Community/State Teams Addressing Racism's Impacts on Infant Mortality



Team Profiles from the Infant Mortality and Racism Action Learning Collaborative, a project of the Partnership to Eliminate Disparities in Infant Mortality.

Los Angeles, California

TEAM LEADERSHIP

Los Angeles County (LAC) Department of Public Health and California Department of Public Health

ADDITIONAL TEAM MEMBERSHIP

Black Infant Health Program, South Los Angeles Health Projects, March of Dimes, Shields for Families, Healthy African American Families, University of Southern California Department of Social Work, and Los Angeles Best Babies Network

OVERALL STRATEGIES AND FOCUS

Strategy 1: Develop quarterly briefs describing and addressing racism and its relationships to birth outcomes in Los Angeles County. Disseminate to key community partners, stakeholders, and providers.

Strategy 2: Identify and distribute existing educational materials that relate to infant mortality and racism. Convene trainings/workshops and discussion groups for providers and the community in Service Planning Areas (SPA) 1 and 6. Target audiences will include various ethnic groups.

Strategy 3: Design an ALC web site that will serve as a one-point information center for Los Angeles County organizations and residents to acquire information and best practices regarding infant mortality and undoing racism.



In order for our message to be understood, the “racism” topic was never diluted. Co-leads reiterated the objective of the ALC formation and background information of Los Angeles County at every core group meeting and conference call.

THE WORK OF THE LA ALC TEAM

Team Process:

First, the team leadership contacted community agencies and partners with whom relationships already were established. A meeting was convened to present information gleaned from the November 2008 ALC meeting in Memphis, TN. Each partner was asked to commit to the work and attend regularly scheduled face-to-face meetings. Throughout the ALC, electronic communication and teleconferencing was the most effective means of operating. Each team member was responsible for gathering and reviewing existing materials related to infant mortality, racism, and the life-course perspective to develop a library of materials for the web site. In addition, subgroups were formed to: 1) Develop and disseminate an electronic newsletter; 2) Develop the web site; 3) Identify education and training materials and then implement trainings/workshops; and, 4) Develop and disseminate evidence-based publications and briefs.

Specific Activities:

1. South Los Angeles Health Projects (SLAHP) sponsored and hosted a 2 1/2 day “Undoing Racism” Workshop facilitated by the People’s Institute for Survival and Beyond (People’s Institute) for their staff and community stakeholders in February 2010.
2. Shields for Families sent staff to the People’s Institute in New Orleans, LA to participate in an “Undoing Racism” Workshop.
3. Healthy African American Families is developing a male involvement program and is in the process of identifying decision makers in local faith-based organizations as possible partners.
4. In April, 2010, the LAC ALC Team hosted a workshop with “The Commission to End Health Care Disparities”, a joint effort of the American Medical Association, National Medical Association, and more than 66 other healthcare groups and organizations to educate healthcare professionals on effective solutions they can use in their clinical practices to improve the quality of care for racial and ethnic minority patients.
5. The March of Dimes and the Los Angeles County, Maternal, Child, & Adolescent Health (LAC MCAH) SIDS Program provided three Healthy Babies Healthy Futures trainings to community churches and community stakeholders incorporating the work of the ALC in October 2009, November 2009, and January 2010.

Resulting Products and Tools:

- Google Group established for group communication
- Health brief
- Web site
- Library of education materials
- Trainings/Workshops for various health professionals and participating ALC organizations

IMPACTS

The most important result from the L.A. team's work is that increasing awareness and education about racism and its impact on birth outcomes and infant health has become a top priority for each participating organization. Team members have become proactive in educating their staffs and the communities they serve by integrating information from the ALC into their organizations and programs.

For example:

1. South Los Angeles Health Project has hosted trainings from the People's Institute at their facility.
2. Shields for Families had five staff directors attend the People's Institute training in New Orleans, LA and continues to showcase presentations to their case managers to increase knowledge and awareness.
3. LAC MCAH is providing health care disparities trainings to health care providers and to the community at-large through various programs (e.g. Research, Evaluation and Planning, Reproductive Health, Fetal and Infant Mortality Review, Comprehensive Perinatal Services Program, Sudden Infant Death Syndrome and Newborn Screening Programs).
4. LAC March of Dimes and LAC MCAH has incorporated the ALC work into their curricula.

LESSONS LEARNED

Effective communication and meeting together were challenges in the initial stages. However, creating the ALC Google Group, an online place for communicating, and for storing information and documents for view and comments was an efficient, continuous, and timely solution.

One challenge was the amount of time spent at each meeting for orientation, as new participants joined the collaborative at various stages.

As with any collaborative, differences in opinion and ideas arose. It was important for the entire team to be flexible and respectful with varying opinions. The L.A. team realized that obtaining consensus from the group first was an effective strategy to help prevent decisions from being made by a specific person.

Update on Teams at Time of Printing

The February 2010 meeting was the final major activity of the Infant Mortality and Racism ALC, and submitting information for this report in the spring of 2010 was the last requirement of the participating teams. Throughout 2010, and into 2011, ALC staff and teams committed to sharing lessons learned via presentations at conferences and webinars, and via written information in newsletters and other organizational products. Although the ALC had 'officially' ended, ALC teams continued their work, and requested a conference call to update each other on their activities.

The following information was shared on an update conference call in November 2010. Remarkably, eight months after the conclusion of the ALC, all six ALC teams were still active.

LOS ANGELES COUNTY, CALIFORNIA

The Los Angeles County team's web site was completed in the summer, and is now serving as a resource for all of the ALC partners and others in the L.A. area interested in addressing racism and its impacts on birth outcomes. The website is: http://publichealth.lacounty.gov/mch/LACALC/LACALC_index.htm.

The Shields for Families partner organization continued to provide the People's Institute training, with more than 300 staff trained during a two-week period.

Finally, results for the evaluation of the April 2010 training for providers indicate that it was successful. Ninety-eight percent of the providers who attended said they learned a lot about racism and disparities in birth outcomes and they would recommend the training to their partners who were not present. This is particularly remarkable, given that CMEs were not provided.

AURORA, COLORADO

While the Aurora, CO team has had challenges with its goal to outreach to health-care providers and engage the healthcare system, the team experienced some successes in fall 2010. A natural alignment of efforts occurred when the team's PPOR Phase 1 analysis indicated preconception care as an area on which to focus, and the state of Colorado released preconception/interconception care guidelines in January 2010.

The team developed three webinars for providers, in partnership with the state health department and one of the primary liability insurers for health-care providers. The liability insurer was an effective way to reach providers. First, the insurer hosted a dinner with a core group of providers to get them engaged in the idea of preconception and interconception health. Then, the insurer offered an Experience Rating System (ERS) point to providers who participated in the webinars. ERS points are significant because when physicians receive three points in a year, they get 10 percent off of their liability insurance. Each of the three webinars incorporated work from the Aurora ALC team, with the three calls focused on the following: 1) In-depth