

## A Call to Action: National Infant Mortality Awareness Month

### Infant Mortality and Low Birth Weight Highest for African Americans and Native Americans

In Multnomah County, African American and Native American babies are twice as likely to die within their first year of life. High rates of infant mortality in these groups have been constant over time (see Figure 1). Low birth weight (LBW) and prematurity are birth outcomes that lead to infant deaths. In Multnomah County, Black/African American women are 1.8 times more likely to give birth to a LBW baby compared to all other racial/ethnic groups. LBW babies are born to Native Americans at rates 22% higher than for Whites.

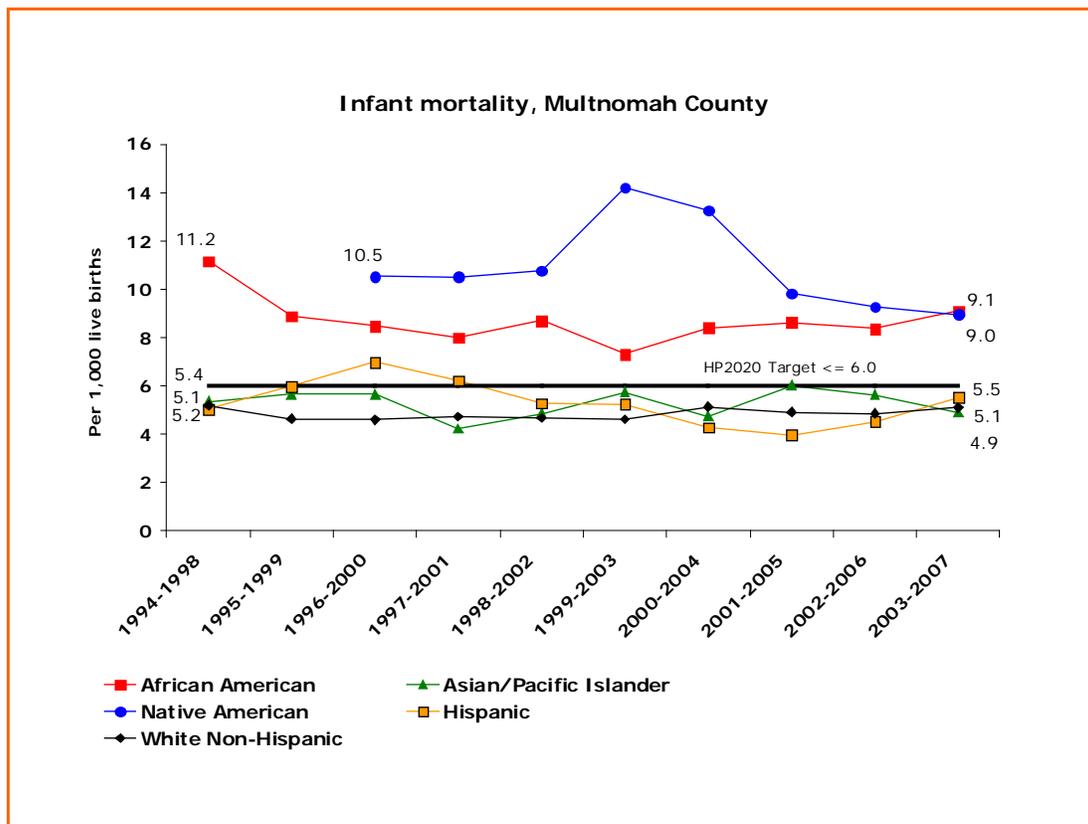


Figure 1

In addition to increasing risk of infant death, prematurity and low birth weight can cause life-long health problems including increased risk for chronic diseases such as diabetes. Children who are born too soon or born with LBW are also at greater risk for having learning disabilities. To ensure children are ready to read by age 5 – an important indicator in life-long academic success and achievement – these children require significant intervention to address disability and prevent further developmental delays.

The Health Department believes these inequities are unacceptable; every child born in Multnomah County deserves a strong start to life.

## New Approaches to Reducing Health Inequities

The Multnomah County Health Department and the Healthy Birth Initiative (HBI) are committed to ensuring every baby is born full term and at a healthy weight. By implementing innovative health care and public health approaches, we can improve birth outcomes and prevent infant mortality.

To be successful, new approaches must address root causes of poor birth outcomes such as poverty, stress, racism, lack of access to healthy foods, lack of access to healthy environments and limited access to culturally relevant health care and social services.

HBI is addressing root causes of poor birth outcomes in the African American community by:

### What are health inequities?

Health inequities are disparities in health that are a result of systemic, avoidable and unjust social and economic policies and practices that create barriers to opportunity.

- **Preventing infant deaths.** Compared to African American women not enrolled in HBI, clients who received case management services experienced no infant deaths and had lower rates of low birth weight babies.
- **Linking clients to community services.** 100% of women enrolled in the program identifying educational attainment as a priority made a linkage with a referral.
- **Increasing knowledge.** 99% of clients and community participants who attended an HBI health education classes said they learned something new and 100% said they would recommend it to a friend.
- **Increasing community capacity to address health inequities.** HBI's Community Consortium includes current and former HBI clients as well as community partners. The Consortium received numerous trainings including policy-making, community organizing, inter-conception care, domestic violence prevention, infant mortality prevention and healthy weight.
- **Improving the environment in which women work, live, play and pray.** HBI worked with a coalition of partners who helped pass Oregon HB 3311 – a bill that reimburses doula services. This legislation will increase access to culturally-specific labor and delivery support to pregnant women. The Consortium also coordinated with County and community partners to implement Multnomah County's Healthy Retail Initiative and helped to implement nutrition policies in faith-based settings.

The Health Department, along with County and community partners, is also working to reduce health inequities among Native Americans via the **Future Generations Collaborative (FGC)**. The FGC represents a significant shift in how county agencies partner with Native stakeholders in health promotion planning. The focus of the FGC is on capacity building and collective problem solving, with an emphasis on creating population-level policy and community-level strategies to health promotion. Through partnerships with the Native community we are better equipped to create culturally-relevant approaches to improve birth outcomes in urban Native communities.