The Greater Racine Collaborative for Healthy Birth Outcomes/Racine LIHF Project
In Partnership with the University of Wisconsin School of Medicine and Public Health, Wisconsin Partnership Program “Lifecourse Initiative for Healthy Families (LIHF)”

PRESENTERS:
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Infant Mortality in Racine

- During 2004 - 2006, the infant mortality rate for African-American infants in Wisconsin was 17.2/1000 compared to 5.0/1000 for Caucasian infants, almost 4 times higher.
- During 2004 - 2006, the infant mortality rate for African-American infants in Racine was 23.1/1000 compared to 6.0/1000 for Caucasian infants, almost 4 times higher.
- The African American infant mortality rate in Racine is one of the highest in the U.S. & the world.
Classification of fetal or infant loss by Zip Code
(n = 82)
History of the Collaborative

- Prior to 2008 initiatives undertaken by community groups and the City
- Summer-winter 2008/09 initial meetings and development of a framework for a strategic plan by a broad group of individuals, agencies & organizations at The Johnson Foundation (TJF)
- Fall 2009- Responded to an RFP issued by WPP at the request of the broad coalition
- TJF identified as the convening organization in partnership with R/KCAA
- April 2009- funds awarded by WPP
- July 2010- Racine LIFH early implementation project grant awarded to PWNS for the Sister/Friends component of the Birthing Project USA
Our Plan

- Expand and solidify efforts in Racine to address African American infant mortality and improve the health status of African American women and families

- Create a Maternal Child Health Lifecourse Community Action Plan and a formal Lifecourse Collaborative to advance this work
Our Plans cont.

Focus on the best options for improved systems, services and supports to change the current trend

Our goals are to:

- reduce African American infant mortality by 50% in 5 years compared to 2007
- reduce African American pre-term birth by 25% in 5 years compared to 2007
To Achieve These Goals, We Recognize That:

- Excellent pre-natal care is critical but not sufficient to achieve healthy birth outcomes.
- Access means more than having a place to go, it also means being able to get there, feeling welcome, respected and supported.
- Low and very low birth weight babies who survive often give rise to serious social and economic costs.
- The Lifecourse perspective provides a framework for understanding and addressing the health, social and economic systems and programs that, when viewed and acted upon in a collaborative fashion, can lead to healthy birth outcomes.
- Sufficient resources are required to bring essential and proven services and programs to scale and to support the collaboration required to increase their efficacy.
- All duplication of services and programs is NOT necessarily unnecessary and in some cases is desirable.
Partnering Organizations

- The Johnson Foundation at Wingspread
- Racine/Kenosha Community Action Agency
- City of Racine Health Department
- Professional Women’s Network for Service-Racine African American Health Coalition
- Next Generation Now, Inc.
- Infant Death Center of Wisconsin
- Racine Community Health Center
- Wheaton Franciscan Healthcare-All Saints
- Aurora Health Care
- Caledonia/Mt. Pleasant Health Department
- Wheaton Franciscan Healthcare-All Saints Foundation
- Health & Nutrition Service of Racine
- Kenosha - Racine - Walworth Tri-County Tobacco Free Coalition
- Racine County Human Services Department
- Racine Family YMCA-Focus On Fathers
- Racine Infant Mortality Coalition
- Women’s Resource Center
- Racine Unified School District
- Gateway Technical College
- UW-Milwaukee-School of Nursing
- United Way of Racine County
- Wheaton Franciscan Health Care Medical Group
- Dr. Martin Luther King, Jr. Community Center
- Foundations of Life, Inc.
- Children’s Service Society of WI
- Spanish Centers of Racine
- Alverno College
- Children's Service Society of Wisconsin
- Health and Nutrition Service of Racine, Inc.
- Wisconsin Department of Workforce Development
- Wisconsin Division of Public Health
- University of Wisconsin-Parkside
- Wisconsin Literacy Council-Health Literacy Initiative
Operating Principles

- Maximize cooperation, coordination, and integration of efforts among diverse agencies and stakeholders
- Creation of new strategies and Lifecourse approaches—not business as usual
- Promote shared learning and mutual respect among community and statewide partners
- Recognize the critical voices of African American families and community members
- Build upon or expand models and programs that are successful
- Integrate, support and strengthen existing efforts and community strengths
- Create new partnerships to leverage needed resources
- Build and sustain public and political will for action
Operating Principles

How will we reach agreement-Principles for Decision Making

- Respectfully agree to disagree
- Keep our eyes on the prize (healthy babies, thriving families)
- Define all ideas as good and welcome—even if not ultimately adopted
- All are bound by decisions reached
- Vet decisions prior to action
- Make sure our decisions fit with the Lifecourse perspective priorities we have agreed to
Operating Structure

Team #1: Improving Health Care Services

Team #2: Strengthening Families and Communities

Team #3: Addressing Social and Economic Inequities

Racine Community

Early Implementation Project
Sister Friends-Birthing Project

Project Manager-Samantha J. Perry

Johnson Foundation

Racine Kenosha Community Action Agency, Inc.
Team #1: Improving Health Care Services

- Expand health care access over the lifecourse
Team 2

Team #2: Strengthening Families and Communities

• Strengthen father involvement in families
• Create reproductive social capital in communities
• Invest in community building and urban renewal
Team #3: Addressing Social and Economic Inequities

- Reduce poverty
- Support working mothers and families
Facilitators

Project Manager - Samantha J. Perry

Johnson Foundation

Racine Kenosha Community Action Agency, Inc.
Early Implementation Project

SISTER FRIENDS
A PROJECT OPERATED BY:
THE PROFESSIONAL WOMEN’S NETWORK OF SERVICE (PWNS)
We support the recommendations made by Pat McManus and Kathleen Pritchard on September 8

In addition:

- Endorse and support community or regional FIMR—the data and information gleaned is very valuable to communities in understanding and addressing infant mortality.
- Disconnected data and service streams, disparate application processes, redundancy of processes, and silos across and within systems discourage efficiency and effectiveness of service delivery and likely increase costs as well as increase stress on those needing assistance (for an alternative approach see the Illinois data and information system CornerStone at [https://www.dhs.state.il.us/page.aspx?item=32215](https://www.dhs.state.il.us/page.aspx?item=32215) and the Illinois Administrative Code 630 at [http://www.ilga.gov/commission/jcar/admincode/077/07700630sections.html](http://www.ilga.gov/commission/jcar/admincode/077/07700630sections.html))

- Examine transportation rules and regulations as they pertain to access for pregnant women.
QUESTIONS?