

# CARING FOR 2

Helping through every step of pregnancy...and beyond!

COLUMBUS, OHIO • PROJECT SUMMARY 2011



## WHO WE ARE

*Caring for 2 (CF2)* is a federally funded Healthy Start Project to improve birth outcomes for African American women, and helps build a coordinated local health system for maternal and infant health.

CF2 case management is an interdisciplinary team of community care coordinators, public health nurses and licensed social workers.

## WHAT WE DO

- In home visiting for pregnant women at high risk for poor birth outcomes.
- Promote better living conditions, such a long-term housing.
- Reduce risks associated with maternal depression, tobacco use, drug/alcohol use, late prenatal care, and unsafe sleep environments.
- Empower residents to be an active part of the health care system.
- Improve access to health care and health insurance.

**“...infant deaths are preventable, if we realign our priorities and our financial incentives.”**

**- Patricia Temple Gabbe, MD, MPH, Ohio Collaborative to Prevent Infant Mortality**

## WHO WE SERVE

African American women who are pregnant or parenting young children living in Columbus neighborhoods with the highest rate of poor birth outcomes. We served 134 women in 2011, totaling 640 women and 402 babies since 2005.

## A PROGRAM THAT SAVES MONEY

With the average direct health care of premature babies costing over \$46,000 for the first year of life<sup>2</sup>, the program's reduction of 6% in premature births represents a savings of over \$100,000.

## WHY CARING FOR 2 IS CRITICAL

Prematurity/low birth weight is the second leading cause of infant deaths and the leading cause for African American infants (US)<sup>1</sup>. Women living in CF2 neighborhoods have a rate of low birth weight of 11.8 and a 4.6 rate of 'very low-birth weight' -- nearly 9x higher than the national goal.

Premature births among *Caring for 2* mothers has declined since last grant period, dropping to 17.7% (2010-2011) from 23.7% (2005-2009).

## FOCUS ON DEPRESSION

It is well documented that maternal depression, if gone untreated, and can have devastating effects on parenting and child development.<sup>3</sup>

*Caring for 2* saw a decrease in depression among mothers from past program years. During 2010-2011, 12.7% of *Caring for 2* mothers rated high for depression, a drop from 23.2% during the 2005-2009 grant period.

Several program factors are focused on making such improvements, such as a strong Maternal Depression Task Force of collaborating partners and in-home clinical counseling. This model has since been replicated by other healthy start projects.

## HIGHLIGHTS

2010-2011

Given the multiple challenges facing our mothers, one would expect birth outcomes for CF2 participants to be grim. Despite such challenges, our outcomes are very promising...

83.3% of pregnancies were full term

69.3% started prenatal care in the 1<sup>st</sup> trimester

10.5% drop in high post partum depression

2.2% of babies were very low birth weight

# WHAT YOU SHOULD KNOW...

## OHIO FACTS ON INFANT MORTALITY\*

- 1,109 Ohio infants died in 2009.
- Ohio's infant mortality rate of 7.7 deaths per 1,000 live births has not substantially changed in over a decade.
- Ohio's infant mortality rate exceeds both the national rate of 6.75 and the Healthy People 2010 national public health goal of 4.5.
- Disparities between whites and African Americans are unacceptable: the 2009 rate for whites is 6.4 and the rate for African Americans is 14.2.
- The Medicaid program pays for 40% of Ohio's births and bears a heavy cost burden of poor birth outcomes.

In Ohio, an African American woman with five or more years of college is **MORE LIKELY TO HAVE A PREMATURE DELIVERY** than a white woman with only a high-school education or less.\*

## CARING FOR 2 IN THE NEWS



## COSTS OF PREMATUREITY\*

- Prematurity, also called preterm birth, is the **#1 killer of newborns** and a leading cause of death in the first year.
- Prematurity is a major risk factor for illness and disability.
- Prematurity costs Ohio **\$1 billion a year**.
- Direct health care costs to employers for premature babies during the **first year of life average \$46,004**, compared to \$3,859 for babies born healthy and full term.

\*Source: Ohio Collaborative to Prevent Infant Mortality