Silent Crisis

THE LIFECOURSE INITIATIVE FOR HEALTHY FAMILIES (LIHF)

Addressing Infant Mortality Among Wisconsin’s African American Communities

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Wisconsin Partnership Program Grant Supported Programs

Improve Prenatal Care

LIHF grants improve prenatal care

One example of a successful group prenatal care model is “Centering Programs.” This program provides education and support, in addition to health care. Mothers feel empowered to make healthy lifestyle decisions, prenatal care providers report high satisfaction with this effective care model, and most importantly, babies are born healthier and closer to full term.

Increase Family and Community Support

LIHF grants increase social support networks for pregnant women and new mothers and families

With models such as the "Birthing Project USA" program, a pregnant African American woman benefits from the support of a community volunteer called a "Sister Friend" who guides, supports, educates and helps provide transportation to medical appointments for the expectant mom throughout her pregnancy and the first year of her baby’s life.

Strengthen Father Involvement

LIHF grants improve family support, including an increase in fatherhood involvement

Children who grow up in families with fathers present are more likely to succeed. Programs such as “Young Dads” help African American fathers achieve employment, further their education and accomplish their own goals. Leaders believe it is a key strategy in developing a generation of fathers who are able to support their children emotionally and financially.

You Can Help

• Create awareness of this critical health issue. Contact Wisconsin Partnership Program and invite staff to speak to your group
• Learn more about what community residents are doing to address this issue
• Invest in innovative solutions that strengthen family and community systems
• Support research that will help guide future investments

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* U.S. Census International Database, countries with population greater than 250,000, 02/11/09.

We Can Do Better

The issue of infant mortality among the state’s African American communities has lacked public attention and discussion. We know we can – and must – do better.

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UNIVERSITY OF WISCONSIN SCHOOL OF MEDICINE AND PUBLIC HEALTH

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No event is more soul wrenching than the loss of a baby. This tragic event is happening at an alarming rate among African American families in Wisconsin. In our state, an African American infant is three times more likely to die than a white baby. Perhaps more tragic is that these deaths are largely preventable.

Leading and Investing in Change

Health advocates around the world generally regard infant mortality as a measure of the overall health of a community. Each year in Wisconsin there are approximately 100 African American infant deaths. Compared with other countries, Wisconsin’s African American infant mortality rate of 14.7 per 1,000 deaths would rank 86th in the world, between Botswana and Jamaica.* Yet the scope of this tragedy has largely gone untold.

The University of Wisconsin School of Medicine and Public Health (SMPH) is dedicated to improving the health of all, and believes that improving birth outcomes among African American families is a critical step in improving public health. With a commitment of expertise and funding, the school is collaborating with Milwaukee, Racine, Kenosha and Beloit to address this alarming trend. Through the Lifecourse Initiative for Healthy Families (LIHF) the school’s Wisconsin Partnership Program (WPP) has pledged $10 million in community grants to address this disparity.

Perplexing Problems

We know that the primary cause of infant mortality is premature birth and low birth rate. Despite decades of effort by physicians, community advocates, public health leaders and local organizations to increase access to prenatal care, African American babies continue to be born too soon and too small. Wisconsin communities are serious about improving outcomes and reducing disparities. Collectively we must identify the complex issues that cause health disparities and find ways to correct them. A growing volume of research shows that when it comes to healthy birth outcomes, access to quality health care throughout a woman’s life is critical. Healthy moms have healthy babies.

And we know that environment matters. The communities in which our mothers and infants live, a supportive network of friends and family, an involved father, access to healthy food, and economic security all play an important role in a baby’s healthy birth and development.

**Promising Solutions**

Almost 90 percent of the state’s African American babies are born in the southeast region of Wisconsin, which includes the cities of Beloit, Kenosha, Milwaukee and Racine. Each community has its own unique strengths and opportunities for improving infant survival and health which are described in LIHF community action plans.
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Leading and Investing in Change

Health advocates around the world generally regard infant mortality as a measure of the overall health of a community. Each year in Wisconsin there are approximately 100 African American infant deaths. Compared with other countries, Wisconsin’s African American infant mortality rate of 14.7 per 1,000 deaths would rank it 66th in the world, between Botswana and Jamaica.* Yet the scope of this tragedy has largely gone untold.

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Community-Based Solutions

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Promising Solutions

LIHF grants enable communities to broaden the scope and intensity of efforts to use their own unique strengths and resources to increase the number of African American babies who celebrate their first birthday.

An Unprecedented Opportunity

The Wisconsin Partnership Program (WPP) of the UW School of Medicine and Public Health is working with target communities in an unprecedented effort to focus on the problem of infant mortality in a way that addresses local issues and opportunities.

Through the Lifecourse Initiative program, the WPP has invested in collaboratives in each city. Collaboratives include community residents and participants from public health, business, government, not-for-profits, faith-based organizations and advocacy groups—all sharing an intense commitment to making positive changes in the health of women and families.

“Many researchers believe that the added burden of stress throughout a woman’s life explains why African American women with advanced degrees are more likely to give birth to a premature or low birth weight baby than white mothers who dropped out of high school.”

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Health advocates around the world generally regard infant mortality as a measure of the overall health of a community. Each year in Wisconsin there are approximately 100 African American infant deaths. Compared with other countries, Wisconsin’s African American infant mortality rate of 14.7 per 1,000 deaths would rank 9th in the world, between Botswana and Jamaica.* Yet the scope of this tragedy has largely gone untold.

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Increase Family and Community Support
LIHF grants increase social support networks for pregnant women and new mothers and families.
Models such as the “Birthing Project USA” program, a pregnant African American woman benefits from the support of a community volunteer called a “Sister Friend” who guides, supports, educates and helps provide transportation to medical appointments for the expectant mom throughout her pregnancy and the first year of her baby’s life.

Strengthen Father Involvement
LIHF grants improve family support, including an increase in fatherhood involvement.
Children who grow up in families with fathers present are more likely to succeed. Programs such as “Young Dads” help African American fathers achieve employment, further their education and accomplish their own goals. Leaders believe it is a key strategy in developing a generation of fathers who are able to support their children emotionally and financially.

You Can Help
• Create awareness of this critical health issue. Contact Wisconsin Partnership Program and invite staff to speak to your group
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