Developing and Implementing a Statewide Infant Mortality Action Plan: A Community Collaborative Partnership

Monique A. Norfolk, MPH, Tola Aina, MPH, Hilary Sedovic, BSW, William Scott, MA, Joyce West, MSW, Cheryle Dyle-Palmer, MA

BACKGROUND

Infant mortality rate is often used as a key indicator for measuring a nation’s health and well-being. Factors associated with infant mortality include maternal health and behaviors, race, socioeconomic status, and quality of and access to medical care.

The infant mortality rate in the U.S. is 6.1 per 1,000 births – higher than those of other developed countries (CDC). Specifically, in the Missouri counties of Dunklin, Pemiscot, Scott and St. Louis City, the rate is 10 per 1,000 births or higher.

In December 2014, Parents as Teachers teamed up with more than 30 community organizations to implement an action plan aimed at increasing awareness about factors impacting infant mortality, motivating participants to take action in their communities, and providing practical intervention strategies for service providers.

33% of infant deaths in Missouri are in the Bootheel and St. Louis

15 kindergarten classes were not filled, due to the number of babies last each year.

SETTINGS/PARTICIPANTS

Settings: Urban and rural communities throughout Missouri including non-profits, churches, health departments.

Participants: Parent educators, social workers, maternal and child healthcare providers, executive directors, and state representatives/legislators.

METHODS

Workshops were developed as a forum for parent educators, MCH providers, and community leaders/organizers to learn, exchange ideas and strategies, and develop and revise action plans to reduce infant mortality. Father involvement was a major strategy highlighted during these workshops.

Retrospective surveys were administered to participants after workshop completion to identify any changes in participants knowledge of infant mortality that may be attributed to the workshop.

In addition to the retrospective survey questions, participants were asked to indicate where they are most likely to seek information regarding infant mortality or general health information.

RESULTS

Eighty-seven percent of respondents who participated in the workshops reported an increase in their knowledge of infant mortality post-workshop and all respondents planned to share this information during interactions with families.

Seventy-one percent of survey participants reported that they are most likely to seek information through internet searches, 58.8 percent through agency trainings, and 23.5 percent selected “Other” and specified newsletters/targeted media, doctors’ offices, and Parents as Teachers as frequent sources of information.

Respondents felt that they could further engage fathers by focusing group strategies on fathers’ interests, hosting youth parenting classes, or adding male/father mentoring to their programs.

LESSONS LEARNED

Providers are still striving to learn the variety of strategies that have an impact on infant mortality, especially those strategies that have been highlighted recently such as the influence of the father on reducing infant mortality.

These workshops make certain that additional professional development opportunities are made available to providers, ensuring that providers remain informed of the breadth of available strategies to combat this complex and critical issue.

Organizations can disseminate information and implement these strategies to guarantee that the families they serve are equipped with the tools to reduce infant mortality via program websites, agency trainings, print media, doctors’ offices and Parents as Teachers communications.

The workshops are simple and can be used in a variety of settings. Providing these workshops across settings is recommended as a stepping-stone to reducing infant mortality across many U.S. communities.