

Grassroots Maternal and Child Health Leadership Training Initiative

*To improve **infant mortality** rates, ask the **women**.*

2018-2019 Annual Report

Funded by Riley Children's Foundation

Initiative Director:

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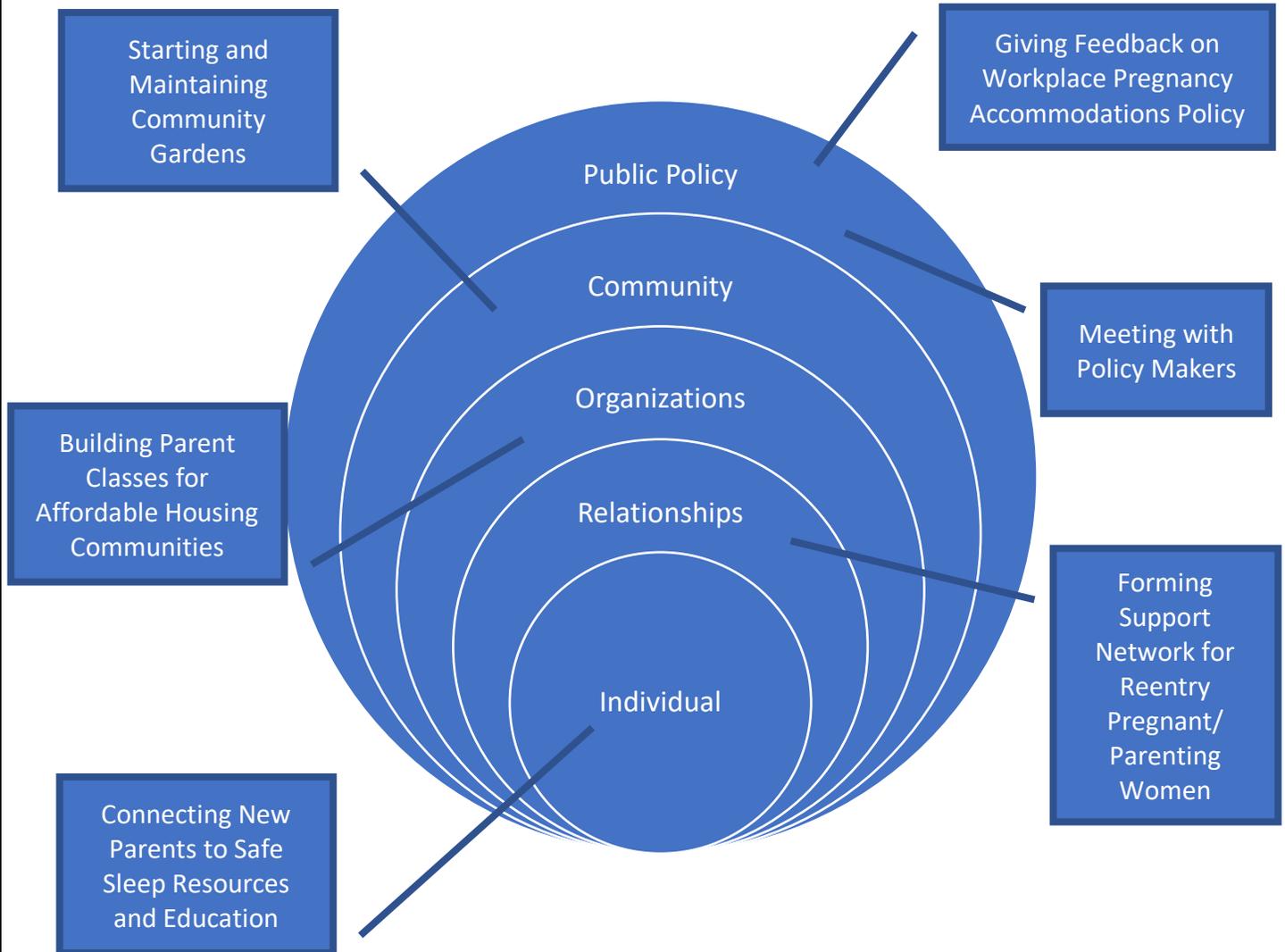
Richard M. Fairbanks School of Public Health

Indiana University

Indianapolis, IN



Highlights: Indiana's Grassroots MCH Leaders Working to Reduce Infant Mortality in Socially At-Risk Neighborhoods



1. Introduction

The first year of the Grassroots Maternal and Child Health Leaders (GMCHL) training initiative was a resounding success. We exceeded our recruitment and retention goals, Indiana's first GMCHL embraced their new community roles with great passion and dedication and a vibrant university-community team of partners was generated to help amplify the voices of the GMCHL to many different groups of stakeholders. The GMCHL began their journey of cultivating healthy neighborhoods to foster healthy pregnancy and infant outcomes, thus laying the community-based foundation to reduce infant mortality rates in socially at-risk neighborhoods. We look forward to the successes of the next year and beyond as we all work together to meet Governor Holcomb's goal of making Indiana the best state in the Midwest to have a baby.

2. GMCHL Recruitment and Retention

Our first year goal for recruitment was 12 women representative of six high risk zip codes. Based on similar community-based efforts we predicted a 25% attrition rate. We successfully recruited 18 women, representative of nine zip codes (Table 1). All eighteen women completed, or will complete their training over the next 3 weeks. One woman was granted a leave of absence due to difficult family circumstances. We planned to have two women per high risk zip code, however, many of the women encountered personal circumstances that resulted in them moving to another high risk zip code. The community partnerships we developed provide opportunities for each woman to serve a high risk zip code.

Table 1: Distribution of GMCHL by Indiana Zip Code

Zip Code	County	Infant Mortality Rate (2012-2016)**	Number of GMCHL
46201	Marion	10.4	2
46203	Marion	12.5	1
46222	Marion	8.3	1
46205	Marion	12.5	3
46208	Marion	11.3*	2
46254	Marion	8.6	2
46260	Marion	8.9	1
46235	Marion	10.2	4
47201	Bartholomew	9.3	2

** Data provided by Indiana State Department of Health, * Less than 20 deaths, unstable rate

3. Meet Indiana's First GMCHL!

Our collaboration with the IUPUI Herron School of Art and Design has significantly helped the progress and marketing of our initiative. One product created was professional headshots of each GMCHL (three women have yet to be photographed). A student majoring in photography works with each woman in this process. The next page provides the photos of the women in our initiative.



3.1 GMCHL Demographics

Table 2: Demographic representation of the GMCHL. For each variable the number of GMCHL who identifies with that level is represented in parentheses.

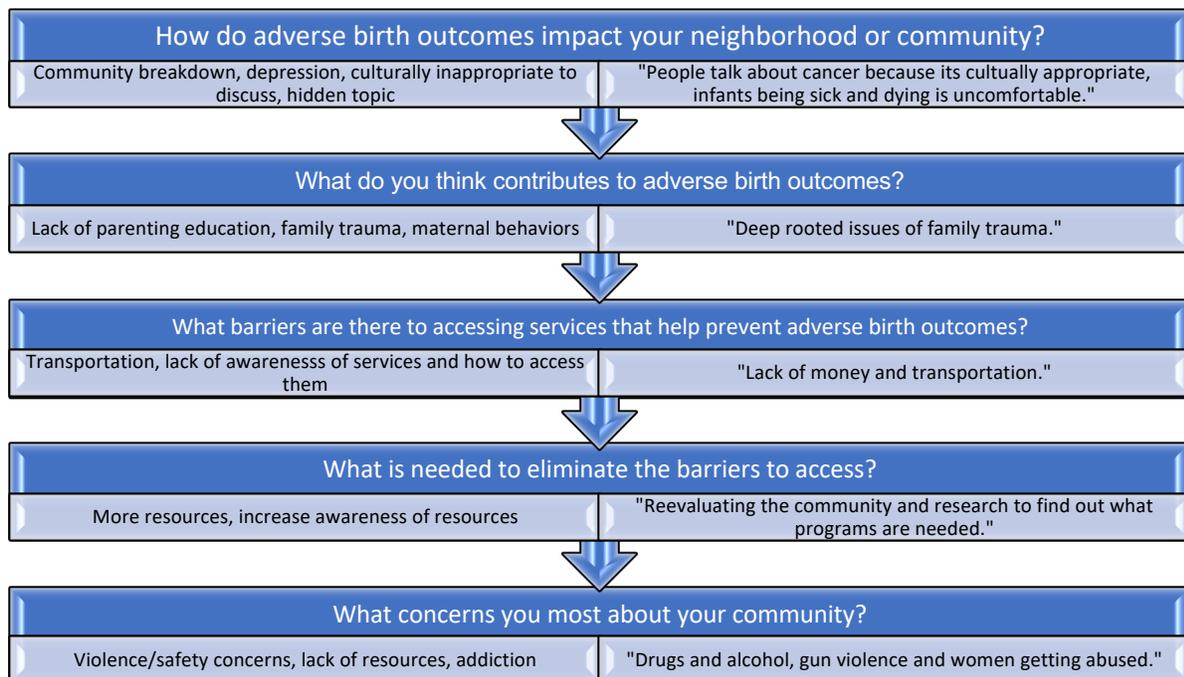
Age Range	Annual Income	Education Level	Employment Status	Relationship Status	Number of Children
18-24 (1)	\$0-10000 (10)	Some high school, did not graduate (2)	Unemployed (8)	Single (12)	1-3 (11)
25-29 (1)	\$10001-25000 (4)	Graduated high school/obtained GED (2)	Self Employed (3)	Married (4)	4 or more (6)
30-34 (2)	\$25001-50000 (1)	Attended some college, no graduation (5)	Part Time (2)	Divorced (1)	
35-39 (5)	\$50001-75000 (2)	Obtained technical certificate (3)	Full Time (4)		
40-44 (2)		Associates Degree (2)			
45-54 (2)		Bachelor's Degree (3)			
55-64 (4)					

*one recently enrolled leader has not completed the demographic form

3.2 GMCHL Insights

Upon entry to the program, we engage each GMCHL in a structured interview to better understand their initial perspectives on local infant mortality issues. Figure 1 below depicts some of the questions asked and the results of a thematic analysis of the responses and quotes that provide us with a community perspective on the issue.

Figure 1: GMCHL's perspectives of community and adverse birth outcomes.

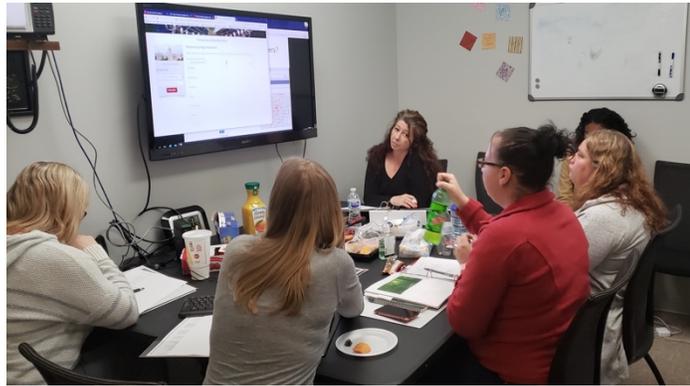


4. GMCHL Training

Each leader undergoes extensive training at the onset of the program. Our training curriculum was recently published in ENGAGE!

(<https://doi.org/10.18060/22727>).

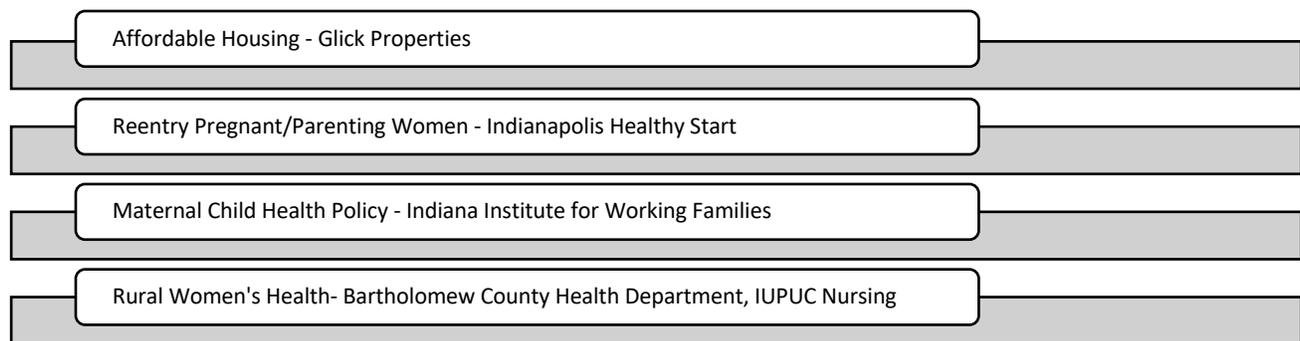
To our knowledge this is the first manuscript of its type to detail a training curriculum for grassroots maternal and child health leaders. Initial training sessions include the following: self-reflective leadership strategies, community health promotion strategies, intergenerational communication, the causes and consequences of adverse birth outcomes, addressing disparities in birth outcomes with a health equity approach, policy development and advocacy. Following the initial training sessions, each leader is mentored in the development of materials to advance her own career/education aspirations. Each woman is mentored in the development of her resume and cover letter, filling out job applications, learning how to search for applications. Each leader then goes through a formal training process of writing her personal story.



5. GMCHL Initiative Organization

GMCHL were organized into teams that meet their personal strengths, passions and needs associated with high risk populations associated with infant mortality. Figure two identifies the team name (focus). Each team has an advisor with expertise in the focus area who works regularly (usually weekly) with the team to help them plan, implement and evaluate their community work. Valuable community/organizational partnerships were developed to supported the work of each focus area. Figure two identifies key partnerships helping meet initiative goals.

Figure 2: Focus areas associated with GMCHL



6. Progress on Initiative Goals

We divided the work of this initiative into five aims. Below we provide a summary of the progress associated with year one outcomes for the five aims and associated action plans.

Aim 1: Facilitate the development of each grassroots leader

- Complete formal grassroots maternal and child health leadership training of women from six target zip codes and launch them on their community development plan.
 - Outcome: We completed training of 18 women from nine zip codes, each woman has identified her focus area and started working on her community development plan.
- Each leader will select and enroll in personal development programming to advance personal life skills (i.e. Complete GED, certificate program, organizational management, financial literacy).
 - Outcome: Eleven women identified their personal development goals; seven other women are in the process of identifying these goals. Examples of personal accomplishments to date include:
 - *one began GED training*
 - *one started her own business*
 - *one gained full time employment*
 - *one gained part time employment*

In September we will be including life coach training for each woman to help her navigate the process of meeting her goals.

- Each leader will get training as safe sleep ambassador.
 - Outcome: Each GMCHL is trained in safe sleep skills as a part of their training to equip them to serve the immediate needs of their community members. Eight leaders were given and passed the test associated with initial safe sleep ambassador training. We learned that Indianapolis Healthy Start provided excellent programming in safe sleep training for community members followed by 18 months of mentoring. It is more efficient to utilize this well-established resource and let the GMCHL connect community members to this service.
- Each leader will complete their first personal narrative
 - Seven GMCHL have completed their first personal narrative and the others are in the process of training. Attached is the first edition of HERSTORY, containing the personal stories of four GMCHL.

Aim 2: Leaders link existing healthy pregnancy/infant development programming to meet target community's needs

- Leaders will conduct survey of target communities to determine extent of adverse outcomes, resident needs, resident perspectives on causes/solutions for adverse birth outcomes.
 - Outcomes: Leaders at Carriage House East (46235, affordable housing community owned by Glick Properties) were able to collect surveys from 39 women (approximately 10% of total female population) in the community to learn about their priorities for pregnancy and infant care. Of these

respondents, 81% of the respondents are employed and 73% have access to a MD for their women health needs.

- Key survey findings include:
 - 62% identified a need for high quality, affordable, accessible child care
 - 50% identified cost as the number one barrier to child care
 - 49% state that at some time, lack of child care prevented them from gaining employment or pursuing education
 - Topics of education needs: self-care during pregnancy, fatherhood, infant care.
- Outcomes: Of this cohort of 18 GMCHL, four were incarcerated and all experienced reentry in either a pregnant or parenting state. They strongly identified a valid resource guide to serve reentry pregnant/parenting women. This suggestion is validated by our Indianapolis Healthy Start social worker who has 18 years of experience working with incarcerated mothers and parenting women transitioning from prison to community.
- Leaders partner with agencies/services to bring healthy pregnancy/infant development skill building activities to target community.

- Outcomes

- The affordable housing team has hosted two community skill building sessions in Carriage House East Apartments. The first session included 37 residents and focused on safe sleep. The leaders partnered with Indianapolis Healthy Start, faculty from the IU School of Nursing, an intern from the IU Fairbanks School of Public Health and a locally owned event planning business to provide the event. At the event participants received training in safe sleep practice. Eight pack and plays were distributed, two strollers, two car seats, and 20 bags of infant care items.



- The second session included six participants and focused on skills to identify and help with postpartum depression. Each participant was provided with a post-partum care bag for themselves and to give to a neighbor in need.



- Outcomes: Women on the reentry pregnant/parenting women team have assembled resources associated with meeting the needs of reentry pregnant and parenting women. The manual we are developing is unique in that it is

being assemble by members of our team who experienced reentry while pregnant or parenting and who are networked with organizations that serve this vulnerable population.

Aim 3: Media project: project dissemination activities

- Submit national magazine / web piece, or significant regional media piece
 - Outcome: IU Communications worked with Dr. Turman on creating a pitch to *The Conversation*. The Conversation (theconversation.com) is an independent, nonprofit publisher of commentary and analysis, authored by academics and edited by journalists for the general public. Pieces in The Conversation are distributed to all major media outlets in the United States.
- Develop microtargeted audio/video pieces and other public relations products.
 - Outcome: Three YouTube videos were completed to highlight the GMCHL project in general, GMCHL work in affordable housing and GMCHL work in the reentry process. See links below.
 - #1: <https://youtu.be/vHLZMzFLxv8>
 - #2: <https://youtu.be/5a5-rymyTRY>
 - #3: <http://www.youtube.com/watch?v=owcSnuXIH5A>
 - Outcome: A brochure was created by students and faculty at the IUPUI Herron School of Art and Design and the copyright for this was obtained. See brochure attached.
 - Outcome: A project website was created and is hosted by the Fairbanks School of Public Health (<https://fsph.iupui.edu/research-centers/centers/cheer/maternal-and-child-health-leadership.html>), and a Twitter account was generated (@IndyGMCHL).
- Begin work on documentary film/preproduction & begin filming
 - Outcome: Professor Minor (film director) and his team (up to 10 individuals, mostly IUPUI students) have worked an average of 20 hours weekly since January on filming, editing and preproduction activities. Our film project was accepted as the first film for the IUPUI Arts and Humanities Institute documentary film project. They are now providing us with production space and infrastructure to support the film's production. Our team traveled to Omaha, NE (funded by IU funds to Dr. Turman) to film the women who participated in a similar program developed by Dr. Turman for Omaha's African American community.
- Submit two scholarly manuscripts regarding project development and implementation
 - Outcome: One manuscript accepted in ENGAGE! (<https://doi.org/10.18060/22727>).



- Outcome: Two manuscripts in final stages of development: one examines the storytelling training of GMCHL (*Practicing Anthropology Journal*), the other focuses on the history of women’s grassroots leaders around the world who have worked to improve maternal and child health outcomes (*Signs: Journal of Women in Culture and Society*).
- Outcome: Presentation accepted for 2019 Collaboration Across Borders International Conference, focused on Interdisciplinary Teaching/ Service (October 2019, Indianapolis, IN). Dr. Deb Stiffler, associate professor of nursing, will present on: *How an Interprofessional Team Develops and Implements a Grassroots Maternal-Child Health Leadership Program to Address Infant Mortality*.
- Exhibition of leaders’ products and programs



- Outcome: An Inauguration Event (December 2018) was hosted for the first four GMCHL who completed their initial training requirements. First Lady Janet Holcomb was present to provide remarks and help with the inauguration

ceremony. Also, in attendance was Dr. Jennifer Walthall, MD, the Indiana Secretary of the Family and Social Services Administration.

- Outcome: We were invited to have an exhibition at the Indiana State House (4/8-4/12) during the legislative session. The exhibition was designed by faculty and students at the IUPUI Herron School of Art and Design. The GMCHL interacted with numerous policy makers, lobbyists and citizens.
- Outcome: On July 29, 2019, Dr. Turman and six GMCHL gave a presentation entitled “The Road to Maternal and Child Health Equity.” The entire MCH branch of ISDH attended this three hour presentation.
- Outcome: On August 28, 2019, one of our leaders participated in a panel discussion hosted by the Black Breastfeeding Coalition.



Aim 4: Public policy maternal and child health advocacy

- Each leader will contact and meet with their local representative to share information regarding program and consult on maternal and child health issues relevant to their community.
 - Outcome: One leader met with Representative Vanessa Summers regarding the need for grandparents' rights. This is needed due to the number of grandparents raising their children in absence of the biological parents.
 - Outcome: Six leaders have developed a policy statement and called their local representative to advocate for this policy.
- Each leader will draft a policy statements.
 - Outcome: A group of three GMCHL are dedicating their time to policy development and advocacy. They recently completed a thorough analysis of a draft workplace pregnancy accommodation policy being constructed by the Indiana Institute for Working Families. The GMCHL work was greatly appreciated and one of the GMCHL will be meeting (September 12) with Representative Karen Engleman to advocate for the policy.
 - Outcome: The policy work of the GMCHL has resulted some being invited to serve on MCH decision making or community action bodies:
 - Three will serve on the Marion County Fetal Infant Mortality Review Community Action Team
 - One will serve on the Indiana March of Dimes MCH Committee



Aim 5: Project infrastructure development

- Write two supplementary grant applications (1 in spring, 1 in summer or fall)
 - Outcome: Submitted a proposal to IUHealth for their community engagement initiative. (Decision pending)
 - Outcome: Submitted a proposal to Empower Indiana to support the work of the reentry pregnant/parenting women portion of our initiative. (Not funded)
 - Outcome: Submitted a proposal to the Rapaport Foundation to support the work of the reentry pregnant/parenting women portion of our initiative. (Decision pending).
 - Outcome: Received a \$20,000 gift from an anonymous donor (to the IU Foundation) to support the professional development of the GMCHL.
- Travel to Washington, DC to meet with potential federal funders, including NIH, Department of Justice, Department of Housing and Urban Development
 - Outcome: Dr. Turman travelled to Washington, DC in May to meet with Department of Health and Human Services staff, IU Foundations Federal Advocacy staff and with Representative Andre Carson and his staff.

7. Additional Success: Developing Future Scholars and Artists to Advance MCH

Throughout the year we have had 15 IUPUI undergraduate/graduate students participating in this initiative. Professor Minor and Dr. Mintus (Sociology Department) received a Multidisciplinary University Research Initiative award (\$12,000) to support the summer work of four undergraduate students. They developed a manual to help communities understand the relationship between social factors and MCH, and presented their work at a university research day.



8. Gratitude for Partnerships

The work of advancing social change, social creativity and social courage is a complex task that requires the hard work and dedicated passion of many people and organizations. We are grateful for the support of the Riley Children's Foundation for their support of this effort – this would not be possible without this support. The following list identifies the diverse array of partners working with us on this vital effort to mentor grassroots maternal and child health leaders as they work to transform their neighborhoods into places that foster healthy pregnancies, infants and families.

IU Fairbanks School of Public Health
IU Department of Pediatrics
IU School of Nursing
IU School of Liberal Arts, IUPUI

- Department of English
- Department of Anthropology
- Department of Sociology

IUPUI Arts and Humanities Institute
IUPUI Herron School of Art and Design

IUPUI University Information Technology Services
Glick Properties
Partners in Housing
Fathers and Families Center
Bartholomew County Public Health Department
Indiana Institute for Working Families
Harrison Center
Indianapolis Healthy Start

COMING ATTRACTION: November 9, 2019, 1-4 PM
Carriage House East Apartments, 10174 Tinton Court, Indianapolis, 46235.
Join us in Honoring HERSTORY!

SPIRIT & PLACE
R/EVOLUTION
NOV 1-10 2019 FESTIVAL

