

Defining the Problem

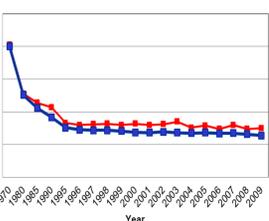
Disparities in Health

Healthy Disparity: a particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage that adversely affects groups of people based on race, ethnicity, gender, socioeconomic status, age, sexual orientation, geographic location, or disability.³

Health Inequity: when disparities in health result from systemic, avoidable, and unjust social and economic policies and practices that create barriers to opportunity.⁷

Racial Disparities in Health for Michigan's Babies

Michigan Compared to U.S. Infant Mortality Rates, 1970-2009⁶

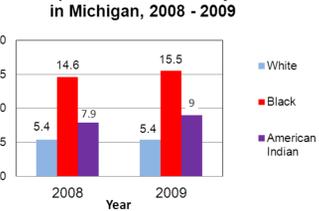


In the past 15 years, Michigan's infant mortality rates have been consistently higher than the national average. Overall, there has been little progress in reducing infant mortality rates.⁵

When comparing infant mortality by race:

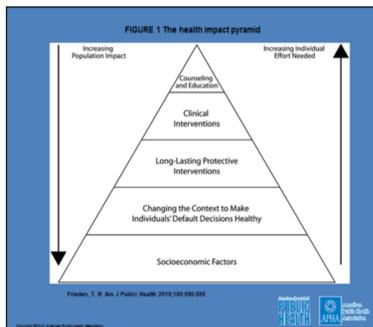
- In 2009, the African American infant mortality rate was 15.5 per 1,000 live births, while the American Indian infant mortality rate was 9.0 per 1,000 live births. In comparison, the White infant mortality rate was 5.4 per 1,000 live births.⁴
- The infant mortality rate for Michigan African Americans is higher than the national average infant mortality rate of 13.3 per 1,000 live births among African Americans.⁴
- The national average infant mortality rate for American Indians is 9.2 per 1,000 live births, which is slightly higher than the Michigan American Indian infant mortality rate.¹ From 2008 to 2009, both African American and American Indian infant mortality rates increased in Michigan, while White infant mortality stayed the same.⁴

Race Specific Infant Mortality Rates in Michigan, 2008 - 2009



Social Determinants of Health

Social Determinants of Health: The economic and social conditions that influence the health of individuals, communities, and jurisdictions as a whole. They include, but are not limited to: safe affordable housing, quality education, job security, social connection, safety, availability of food, access to transportation and a living wage.⁶ The Health Impact Pyramid depicts that population interventions versus individual efforts have the greatest impact.



Today's Solution for Tomorrow's Problem: Health Equity

Health Equity: "attainment of the highest level of health for all people. Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities."³

- Interventions in health care alone are not the way to eliminate health disparities among populations.⁸
- Policies and practice changes that affect change in the social determinants of health of minority populations will facilitate optimal health outcomes for minority populations.⁸
- Improving minority health outcomes by eliminating racial & ethnic and socioeconomic inequalities in health will require a redefinition of health policy, as well as a restructure of health care practice.⁹
- This will require a new commitment to policy changes in a range of areas, including income, education, employment, housing, transportation, and agriculture.⁹

PRIME

Vision

This project is meant to identify and implement the changes necessary in public health practice within the BFMCH of state government to support the reduction of Michigan's African American and American Indian infant mortality rates, thereby reducing state disparities in infant mortality.

Goals

1. Identify and eliminate institutionalized discriminatory policies in Michigan Department of Community Health BFMCH.
2. Focus more of BFMCH funding, policy, and practice towards monitoring and addressing social determinants of racial disparities in infant mortality.

Objectives

Develop a training module, curriculum, or toolkit that promotes understanding of practices that support racism as a social determinant of health and contributes to disparities in infant mortality.

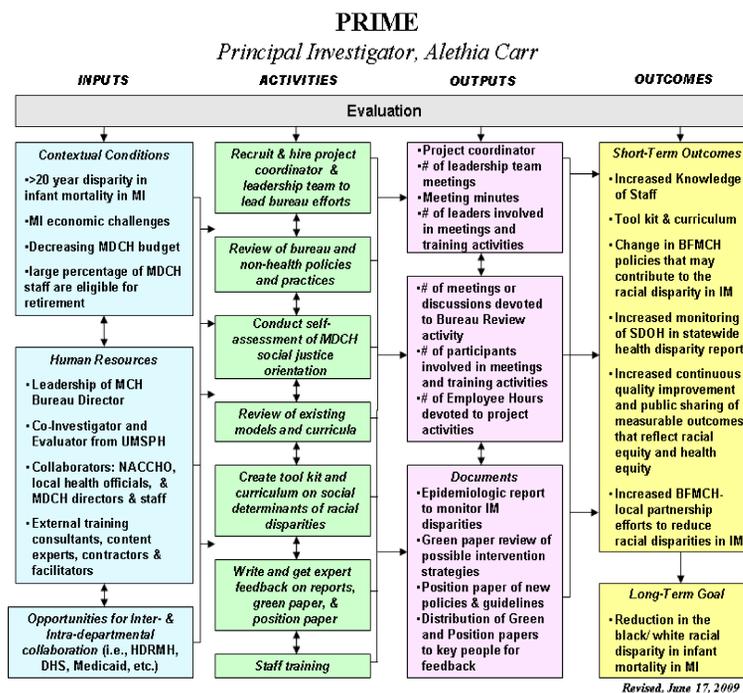
Effectively engage state and local stakeholders in a collaborative effort to codify effective efforts to undo racism and improve infant health outcomes, otherwise known as the *PRIME Local Learning Collaborative*.

Establish a sustainable quality assurance process through revision of the state infrastructure model that includes monitoring of social determinants of health in a statewide health disparity report with public sharing of measurable outcomes that reflect health equity.

Outcomes

If successful, this project will not only lead the statewide effort to reduce racial disparities in infant mortality but provide a model curriculum and tool-kit that MDCH and local/state health departments may use to address disparities in other health outcomes. The tool-kit will include strategies and tools to promote continuous quality improvement, collaboration and accountability, and public sharing of measurable outcomes that reflect racial and health equity.

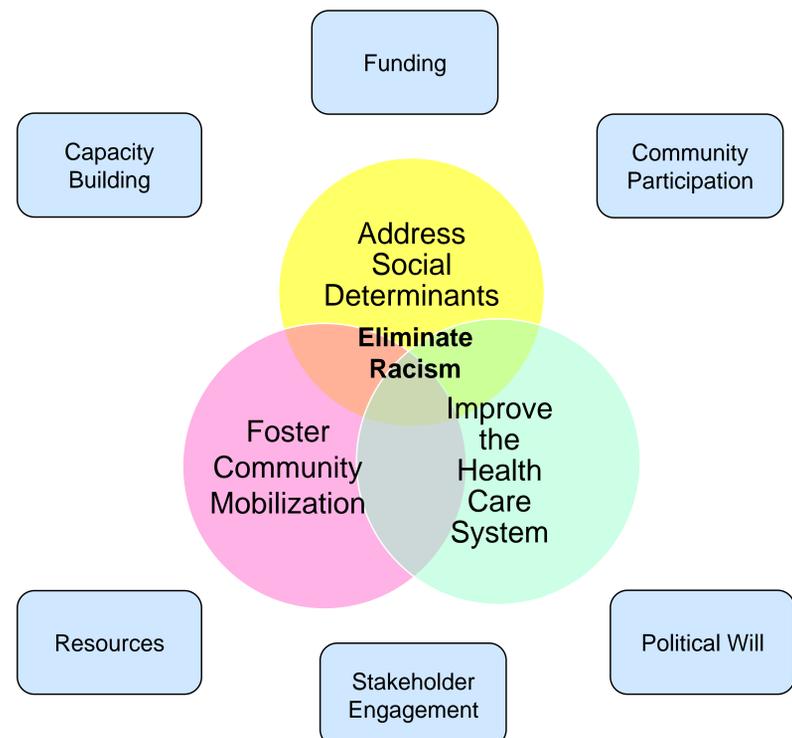
Logic Model



Local Learning Collaborative

- ACCESS
- Berrien County Health Department
- Detroit Healthy Start project
- Dispute Resolution Center
- Genesee County Health Department
- Grand Rapids African American Health Initiative
- Grand Rapids "Strong Beginnings" Healthy Start
- Ingham County Health Department
- InterTribal Council of MI/Native American Healthy Start
- Jackson County Health Department
- Kalamazoo Healthy Babies Healthy Start
- Kent County Health Department
- Michigan Minority Health Coalition
- National Kidney Foundation
- Oakland County Health Division
- Saginaw County "Great Beginnings" Healthy Start
- Washtenaw County Health Department
- Wayne County Health Department

Local Learning Collaborative Activities



Acknowledgments



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PRIME Local Learning Collaborative

References

- 1 Centers for Disease Control and Prevention (2011). Infant Mortality Statistics from the 2007 Period Linked Birth/Infant Death Data Set. *National Vital Statistics Reports*. Table 1-2.
- 2 Frieden, T. (2010). The health impact pyramid. *American Journal of Public Health*, 100:590-595.
- 3 Healthy People 2020. (2011). Disparities. Retrieved from <http://healthypeople.gov/2020/about/DisparitiesAbout.aspx>.
- 4 Michigan Department of Community Health. (2009). Infant, Hebdomadal, Fetal and Perinatal Death Rates by Specified Race and Ancestry Michigan Residents, 2009. Table 9.
- 5 Michigan Department of Community Health. (2009). Infant Mortality Rate: Michigan compared to U.S. (1969-2009).
- 6 Raphael, D. (2004). *Social Determinants of Health*. Toronto: Scholars Press.
- 7 Whitehead, M. (1992). The concepts and principles of equity and health. *International Journal of Health Services* 22: 429-45
- 8 Williams, D. (2002). *Racial/ethnic variations in women's health: The social embeddedness of health*. *American Journal of Public Health* 92(4): 588-597.
- 9 http://www.cafamilyformationlaw.com/storage/Diversity%20Babies%20in%20White.jpg?__SQUARESPACE_CACHEVERSION=1299006583703
- 10 http://www.minnpost.com/stories/2008/08/14/2961/the_next_america_a_majority_of_minorities