

Perinatal News & Events

Cincinnati Children's Perinatal Outreach Program



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Hamilton County Pregnancy Pathways Program: A Closer Look

Across our region, individuals and agencies work daily to improve infant and maternal health. The challenges are large, and it can be difficult to feel the impact of the work.

Some of that impact came into focus with recent research through the University of Cincinnati. Master of Public Health student Susan Sprigg worked with Health Care Access Now (HCAN) to review records from the Pregnancy Pathways Program (see page 2). The project analyzed demographics, barriers to care, and outcomes for 218 women delivering between late 2011 to early 2013. They were divided into two groups: a “negative outcome” group with low birth weight babies and/or time in the NICU immediately postpartum (87 women); and a “positive outcome” group with neither of those characteristics (131 women).

Analysis found few statistically significant differences between the groups in demographics or risk factors. But there was one notable difference: **a positive birth outcome was associated with a higher number of visits with the Community Health Worker.** These findings lend support to the work of the Pregnancy Pathways Program and Community Health Workers.

Other interesting findings:

- **Pregnancy Planning:** From both groups, of the 104 women who were asked, 96% reported the pregnancy was unplanned. 24% of women with more than one pregnancy had been pregnant less than 12 months previously. This raises questions about access to information and resources on reproductive health and contraception.
- **Support:** Studies show detrimental effects of stress on pregnancy outcome. Among all of these women, 51% reported a lack of support, 92% did not have a spouse or partner, 25% experienced high levels of stress, and 15% reported depression.

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Pregnancy Pathways *continued from page one*

- **External resources:** Meeting basic needs was a challenge, with 44% having inadequate, unsafe, or unstable housing, 56% experiencing difficulty with transportation, and 61% reporting inadequate financial resources.
- **Healthy behaviors:** Only 55% of the sample started prenatal care in the first trimester of pregnancy. 19% smoked tobacco, 11% reported other substance use, and 35% did not have a medical home before pregnancy. Lack of a medical home increases the chance of an uncontrolled pre-pregnancy condition, poorly spaced pregnancy, and/or late prenatal care.

<http://healthcareaccessnow.org/>

For more information on HCAN or the Pregnancy Pathway program, contact 513-707-5697; for more information on the research project contact Susan Sprigg at smsprigg99@gmail.com or 513-706-9730.

Susan Sprigg, MPH, RN, BSN, BA



Health Care Access Now™ was created in 2008 to provide centralized “back-office” services for health and social service providers in Greater Cincinnati. HCAN currently manages and delivers community-based care coordination services, including the Pregnancy Pathways program.

In the **Pregnancy Pathways** program a client is referred to one of five program partner agencies and matched with a Certified Community Health Worker (CCHW). The CCHW has face-to-face contact with the client at least once per month, typically in the client’s home, and also conducts telephone “visits” and/or accompanies the client to medical appointments. The CCHW ensures the client has a prenatal medical provider and documents barriers to a healthy pregnancy, and then works with the client to resolve these barriers. This may include locating stable housing, arranging food assistance, finding childcare, or making long-term plans for education and income. Throughout the pregnancy the CCHW provides education and support, addressing topics such as preterm labor, nutrition, breastfeeding, safe sleep, postpartum depression, substance use, infant care, and labor/delivery. The CCHW also works to connect the client and her new baby with a medical home for ongoing care.

Cradle Cincinnati

Cradle Cincinnati has identified three areas of focus that, if invested in, will help drive down our community’s infant mortality rate: preventing prematurity by increasing the amount of time between each woman’s pregnancies, reducing tobacco use and other substance abuse in pregnancy, and promoting safe sleep for babies. We refer to these priorities as the 3 S’s that will save lives: ***Spacing, Smoking and Sleep.***

Evidence shows that waiting 18 months between giving birth to one baby and conceiving the next gives a woman the best chance to have a healthy, full-term baby. Not waiting 18 months or more is strongly associated with premature birth, a factor in two thirds of our 2012 infant deaths.

Another way to prevent prematurity in our community is to reduce smoking rates. Tobacco use, and other forms of substance abuse during pregnancy, can be extremely harmful to a developing baby. Women who smoke during pregnancy are 44% more likely to have an infant death. Help a pregnant woman you know quit by connecting her with 1-800-QUIT-NOW and encouraging her throughout the process.

We must help families through the sometimes difficult and exhausting first year of a baby’s life. One key is to share the “ABCs of Safe Sleep” with a young family that you know: babies sleep safest when they sleep Alone, on their Back and in a Crib. In Hamilton County, 16 babies died in 2012 from unsafe sleep conditions.



Ryan Adcock, Executive Director

Life Center Organ Donor Network

LifeCenter Organ Donor Network is the nonprofit organ procurement organization which serves the Greater Cincinnati area. LifeCenter works alongside hospitals to coordinate and facilitate the process of organ and tissue donation. In the United States over 120,000 people are currently waiting on the National Transplant List, more than 2,000 of which are under the age of eighteen. Locally, there are more than 700 people waiting, 48 of which are children. Candidates for transplantation are matched through blood and tissue typing, urgency, location, and the amount of time spent on the waiting list. LifeCenter not only works with hospitals, but also in the Cincinnati community to raise awareness about the importance of designating oneself as a donor. Making this selfless decision can save the lives of up to eight people through organ donation and potentially improve the quality of life for up to 50 people through tissue donation.

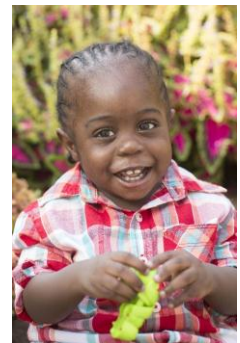
Just last year, Jaydon Green, at less than a year old, traveled from Jamaica to Cincinnati Children's Hospital Medical Center for a life-saving liver transplant. Jaydon's mother, Gilladria Green, describes the moment they learned Jaydon would receive a life-saving transplant and shares her appreciation:

"This moment was so bittersweet. As we were celebrating, at the same time we knew there was a family out there, a mother, who had lost their child and that it could have easily been me. We are so thankful to that family and their loved one for this gift.

Since Jaydon's transplant, he has changed so much. He is a real boy now. Before the transplant, he was so sick he couldn't move from one spot.

After this journey, I would tell anyone to donate. You never know if someone you love or you yourself might one day need it."

Visit lifepassiton.org to read Jaydon's entire story, get more information and designate yourself to be an organ and tissue donor.



Jaydon Green



Andi O'Malley

Director of Public Affairs, LifeCenter Organ Donor Network



Cincinnati Children's Best Babies Zone Update

The Best Babies Zone in the Price Hill neighborhood of Cincinnati is ramping up! From September through November, the Santa Maria site team's Block-by-Block initiative reached families and delivered books in the East Price Hill area. The purpose of this initiative is to empower local residents to deliver materials, resources and community engagement to increase the well-being of East and Lower Price Hill families. This initiative will span over seven months, where Block Captains and Leaders will work together to develop best practices in on the ground, door-to-door neighborhood engagement strategies.

The site team has also worked to support conditions for better outcomes through other avenues. In December, the site team held two focus groups with 13 mothers attending. During these sessions, the women openly shared their thoughts on the challenges to improving the health and wellbeing of families in the community.

On January 9, 2014, the site team held their first moms group hosted by Every Child Succeeds. Eight prenatal moms attended and the women completed an assessment of what moms in the community want to learn. The main items that women stated they'd like to discuss included: how children learn and grow, fun things to do in the community, community resources for me and my family, dealing with stress, child discipline, emergency housing, community safety, transportation, and finding a job.

In the upcoming months, the BBZ site team plans on conducting a focus group with grandmothers. Once the team has completed the third group they will debrief and then develop a final report to submit to BBZ. The moms group will continue to be conducted, as well as the Block-By-Block initiative to build community engagement with the project.

Lena Cleveland

*Project Management Specialist, James Anderson Center
Cincinnati Children's Hospital*

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the health of newborn infants
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www.cincinnatichildrens.org

www.cincinnatichildrens.org/perinatal

[Perinatal Resource Directory](#)

Announcements

Butler County Partnership to Reduce Infant Mortality

4:00-6:00 pm, Tuesday, February 11, 2014

Butler County Educational Service Center

For more information, contact: bailerj@butlercountyohio.org

Cradle Cincinnati Community Meeting

10:00-12:00 noon, Tuesday, February 18, 2014

Cincinnati-Hamilton County Community Action Agency

For more information, contact: Ryan.Adcock@cradlecincinnati.org

Regional Perinatal Nurse Manager Meeting

8:30-11:30 am, Tuesday, February 25, 2014

Mercy Health – Anderson Hospital, Medical Office Building II

For more information, contact: kathy.hill@cchmc.org

Ohio Equity Institute - Cincinnati

10:00 am-12:00 noon, Thursday, February 27, 2014

Theodore Berry Head Start

For more information, contact: LHolloway@marchofdimmes.com or
Kelli.Kohake@cincinnati-oh.gov

Perinatal Community Action Team (PCAT)

2:30-4:00 pm, Thursday, February 27, 2014

Cincinnati Children's, MERC Classrooms 1103 & 1104

For more information, contact: kathy.hill@cchmc.org

Neofest 2014: Narcotics: Maternal, Fetal and Infant Impact

11:30-5:00 pm, Friday, March 7, 2014

Sabin Auditorium, Cincinnati Children's

Register at: www.cincinnatichildrens.org/cme

For more information: janel.chriss@cchmc.org or (513) 636-5470



National Birth Defects Prevention Month



Birth defects are health conditions that are present at birth. They change the shape or function of one or more parts of the body. Birth defects can cause problems in overall health, how the body develops or how the body works. Birth defects also happen to be the leading cause of infant death in the United States. In fact, every 4 ½ minutes, a baby is born with a birth defect in the United States. This is more than 120,000 babies (1 in 33 live births) every year. The most common type of birth defect is congenital heart disease with a birth prevalence of about 1 in 100 births.

Although not all birth defects can be prevented and only 30% of the causes of birth defects are known, research has identified the following preventative measures that can lower a woman's risk of having a baby with a birth defect:

Women who are pregnant or may become pregnant are advised to:

- Consume 400 micrograms of folic acid daily
- Manage chronic maternal illnesses such as diabetes, seizure disorders, or phenylketonuria (PKU)
- Reach and maintain a healthy weight
- Talk to a health care provider about taking any medications, both prescription and over-the-counter
- Avoid alcohol, smoking, and illicit drugs
- See a health care provider regularly
- Avoid toxic substances at work or at home
- Ensure protection against domestic violence
- Know their family history and seek reproductive genetic counseling, if appropriate



*working together
for stronger healthier babies*

[www.marchofdimes.com/baby/
birth-defects.aspx](http://www.marchofdimes.com/baby/birth-defects.aspx)

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CENTERS FOR DISEASE CONTROL AND PREVENTION

<http://www.cdc.gov/ncbddd/birthdefects/index.html>

NATIONAL BIRTH DEFECTS PREVENTION NETWORK

The 2014 NBDPN Birth Defects Prevention information packet is available online at:
<http://www.nbdpn.org/bdpm2014.php>

"Birth defects are common, costly, and critical."

OHIO DEPARTMENT OF HEALTH

www.odh.ohio.gov/odhprograms/cmh/bdefects/bdpm.aspx

Folic Acid

Taking a daily multivitamin containing the B vitamin folic acid is one of the best ways to prevent certain serious birth defects of the brain and spine, known as neural tube defects (NTDs), and an important step toward having a healthy baby. Daily consumption of folic acid beginning before and continuing through the early months of pregnancy is crucial because NTDs occur in the first few weeks following conception, often before a woman knows she is pregnant. As professionals who have the opportunity to interact with childbearing age women before, during and between pregnancies, it is our responsibility to include this message about the importance of folic acid in healthy pregnancy outcomes at every opportunity we have.

Since folic acid was added to the grain food supply in 1998, our nation has seen a 26 percent decrease in NTDs. The March of Dimes and its partners are now currently petitioning the U.S. Food and Drug Administration to fortify corn masa flour with this important B vitamin because NTDs are more prevalent in the Hispanic population than other racial or ethnic groups. By targeting food made with corn masa for folic acid fortification, it would be possible to lower the rate of NTDs among Hispanics. Hispanic women are about 20 percent more likely to have a child with an NTD than non-Hispanic white women, according to the National Birth Defects Prevention Network. Although the reasons for the disparity are not well understood, Hispanic women have been found to have lower intake of folic acid overall, compared to white women.

March of Dimes

In addition to its efforts in prevention of birth defects, the March of Dimes works to advance research on possible causes and treatments and on surveillance efforts.

The March of Dimes joins the National Birth Defects Prevention Network (NBDPN) and the Ohio Partners for the Prevention of Birth Defects in recognizing **January as National Birth Defects Prevention Month.**

Lisa Holloway

State Director of Program Services and Advocacy and Government Affairs, Ohio Chapter, March of Dimes

