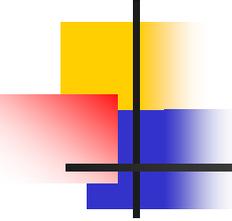


A Conversation
Around Native American
Pregnant Women and Infants



Health Disparities and Birth Outcomes in WA State

- Poverty is inextricably linked to health status.
- Individual health behaviors and risk factors are linked to health outcomes.
- Pregnant women at highest risk of poor birth outcomes need intensive, individualized, and timely services.

Determinants of Health

Multiple levels of influence

HEALTH

- Genetic and biological processes
- Individual behaviors and lifestyle
- Environments in which people live

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Social Determinants of Health

Institutionalized Biases (racism, sexism, etc.)

Health Behaviors and Personal Risk Factors

Access to Health Services

Trust in Health System and Research

Mental Health and Social Support

Stress Due to Social Factors

Economic Opportunity and Equity

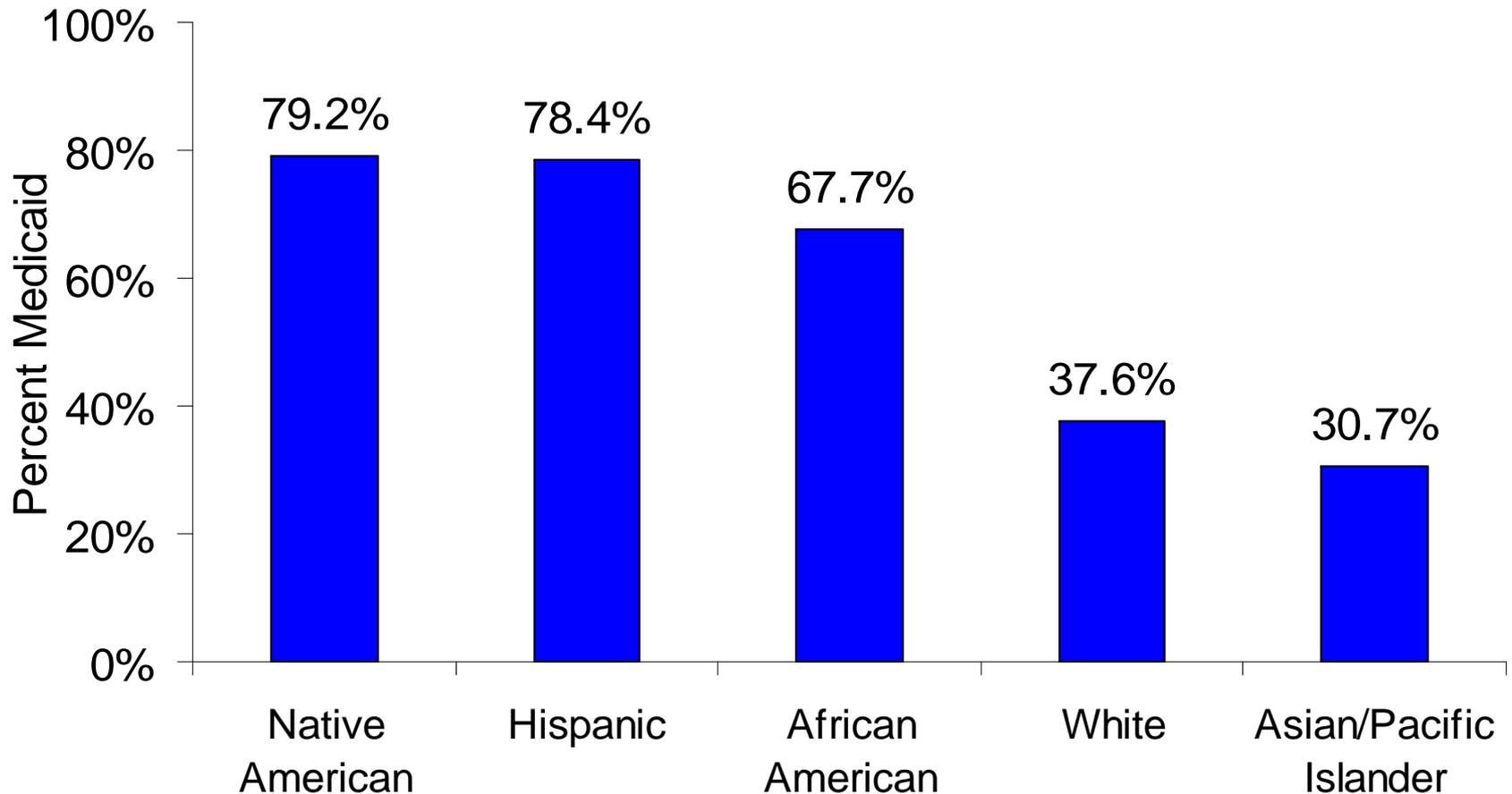
Environmental Risk

Language and Other Cultural Factors

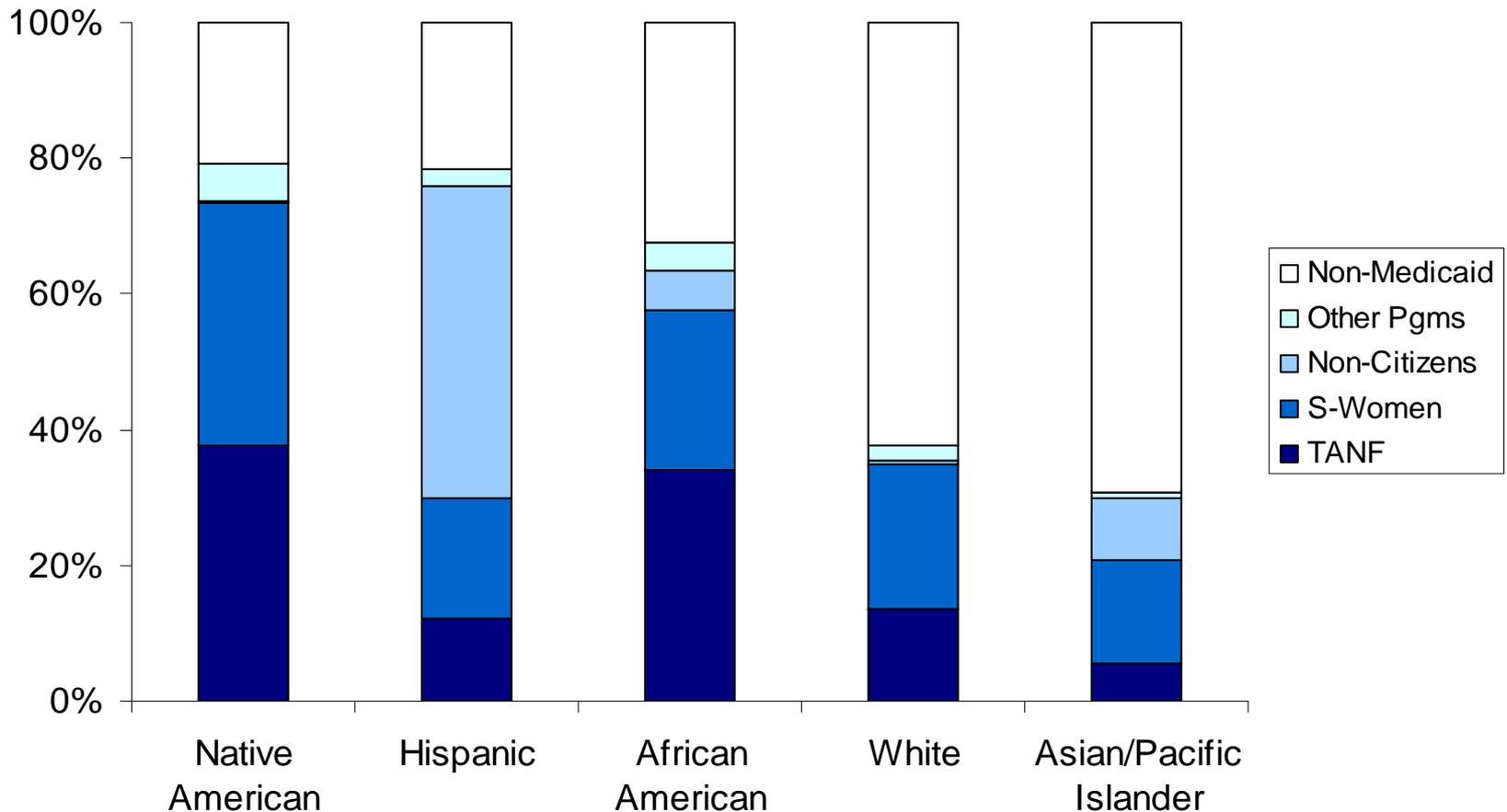
Education Background and Opportunity

Poverty and Race/Ethnicity

Washington Women with 2006 Births



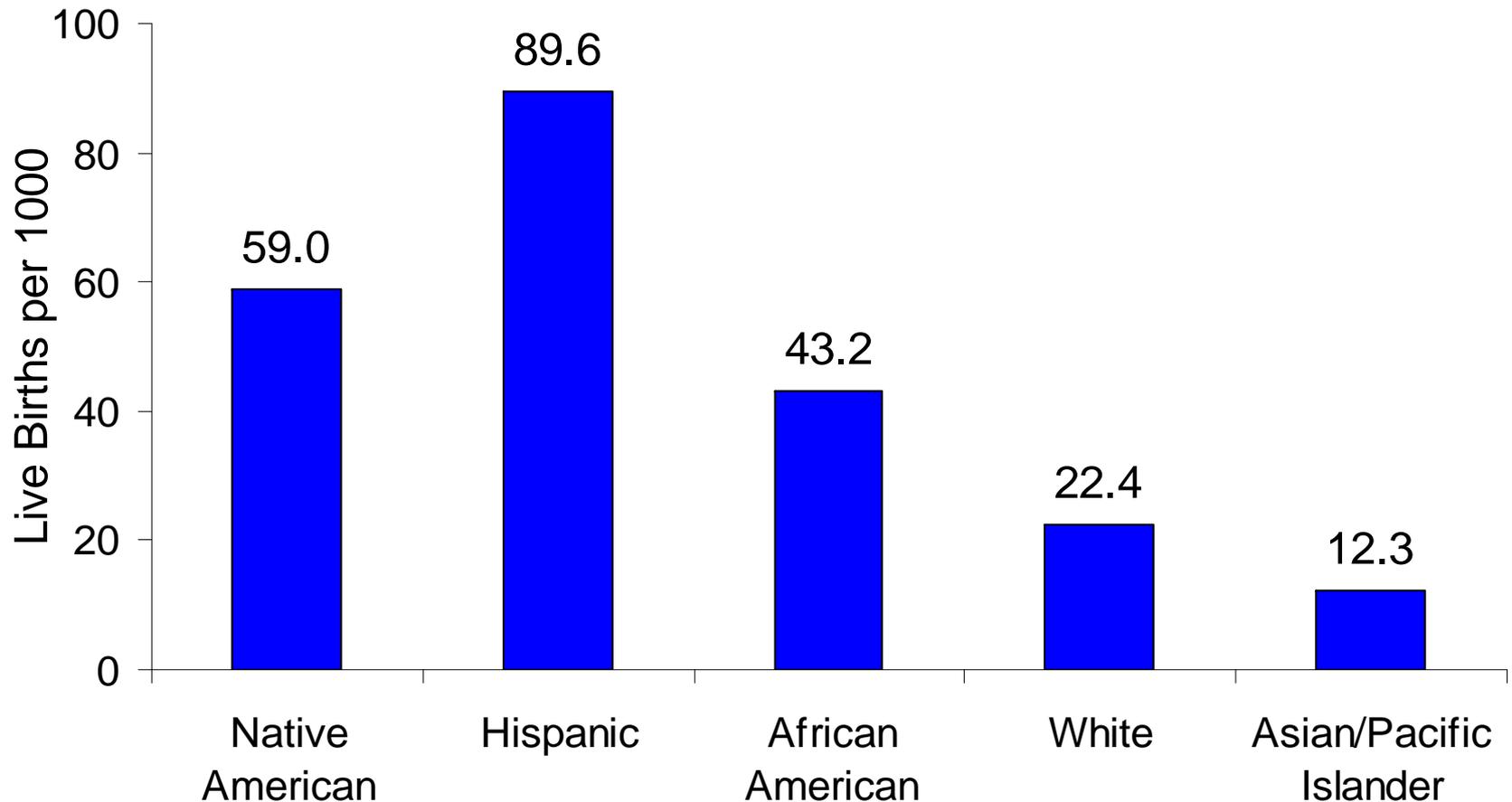
Medicaid Status and Race/Ethnicity Washington Women with 2006 Births



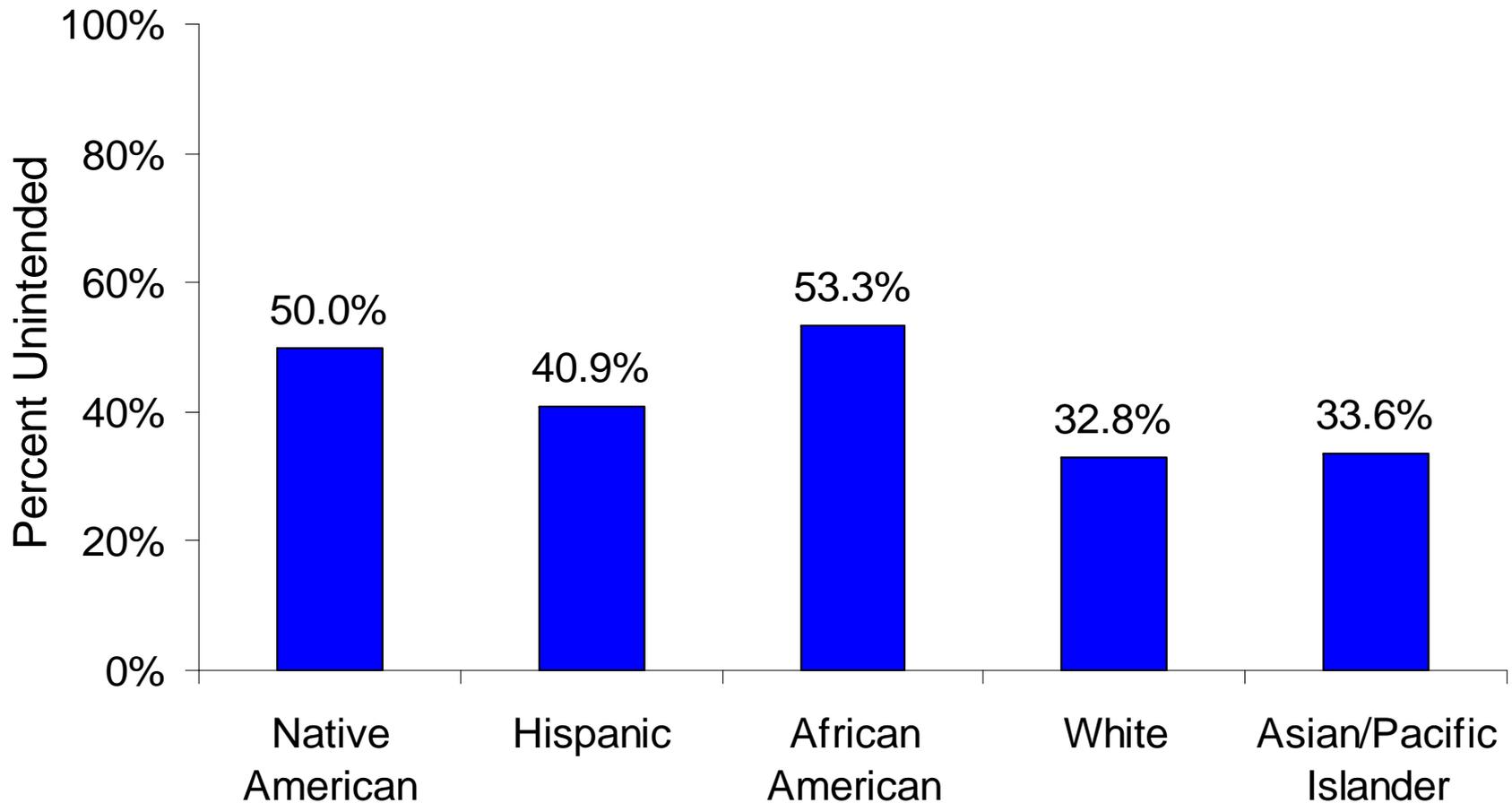
Teen Birth Rate and Race/Ethnicity

Live Births per 1000 Women 15-19

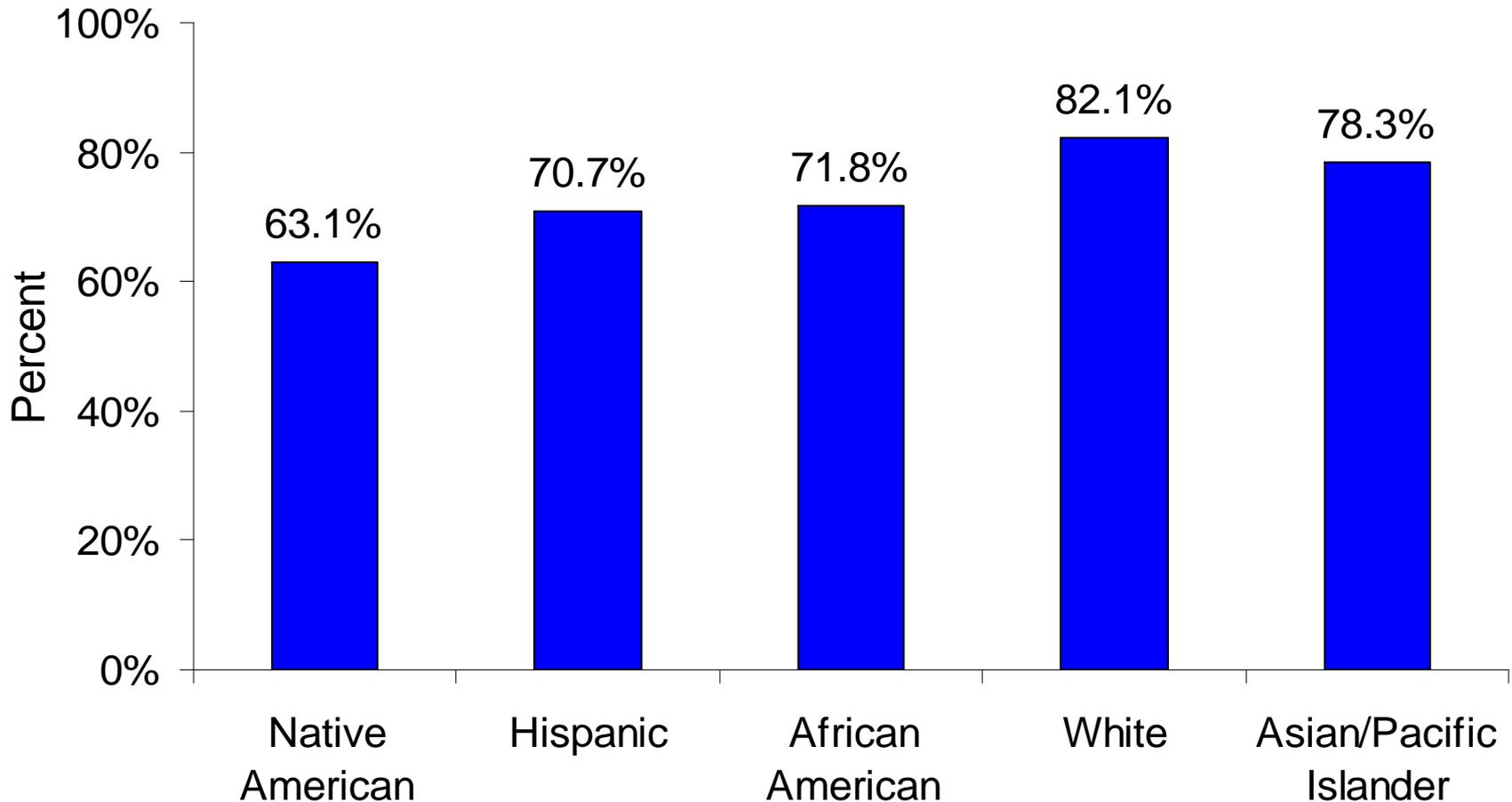
Washington State 2006



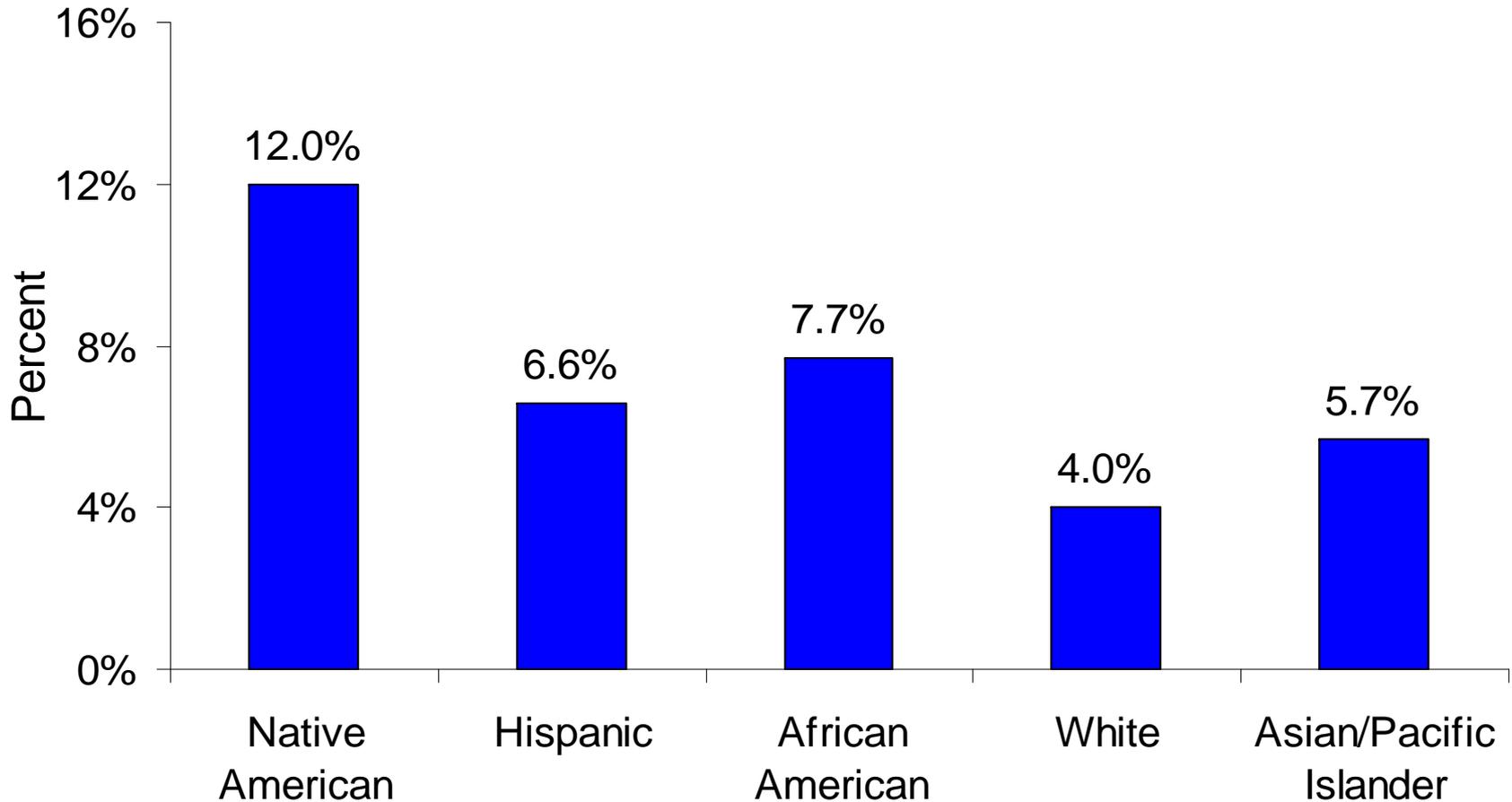
Births from Unintended Pregnancy WA Women with Deliveries 2004-2006 PRAMS/FSDB



First Trimester Prenatal Care Washington Women with 2006 Births

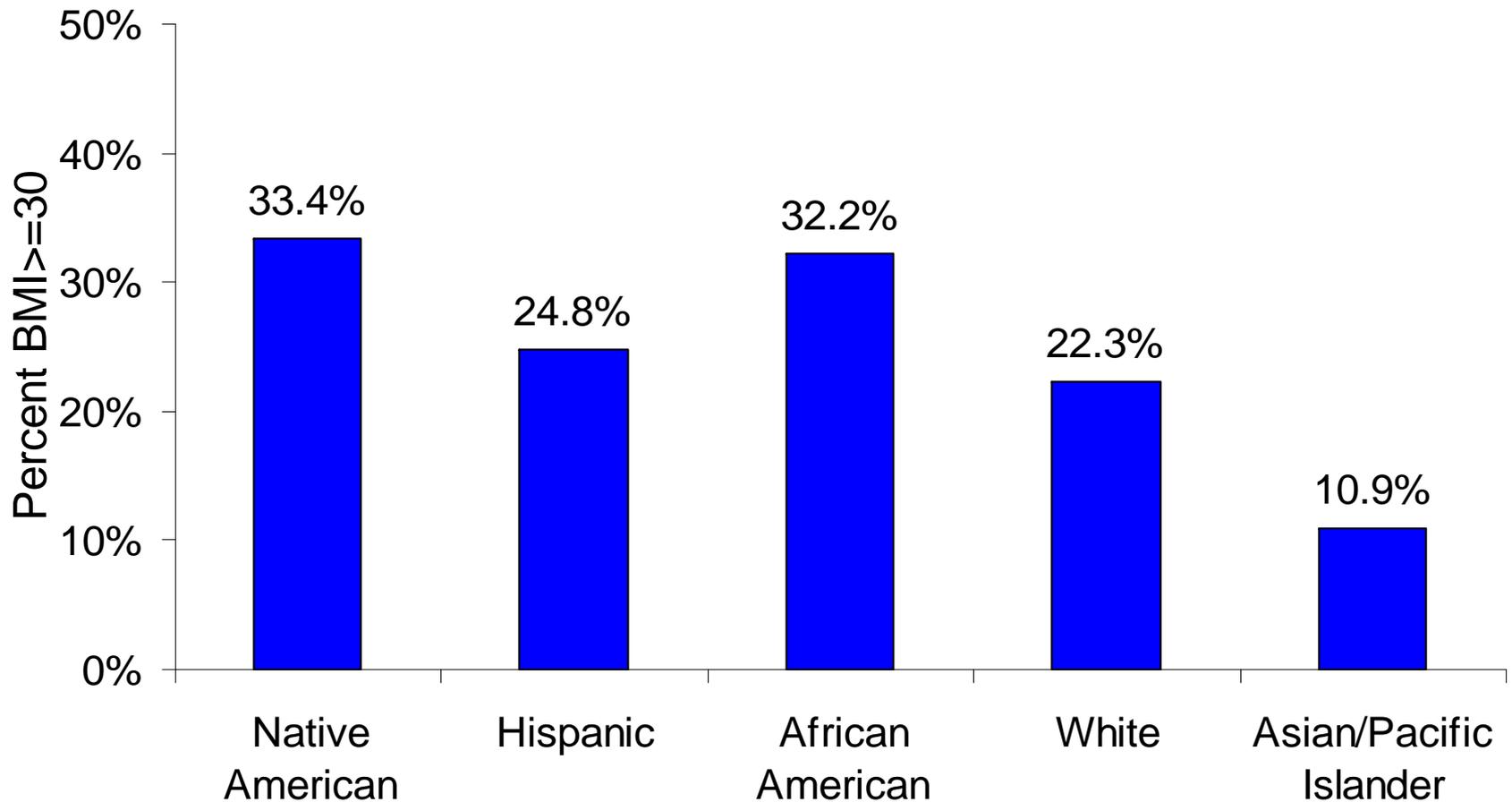


Late or No Prenatal Care Washington Women with 2006 Births

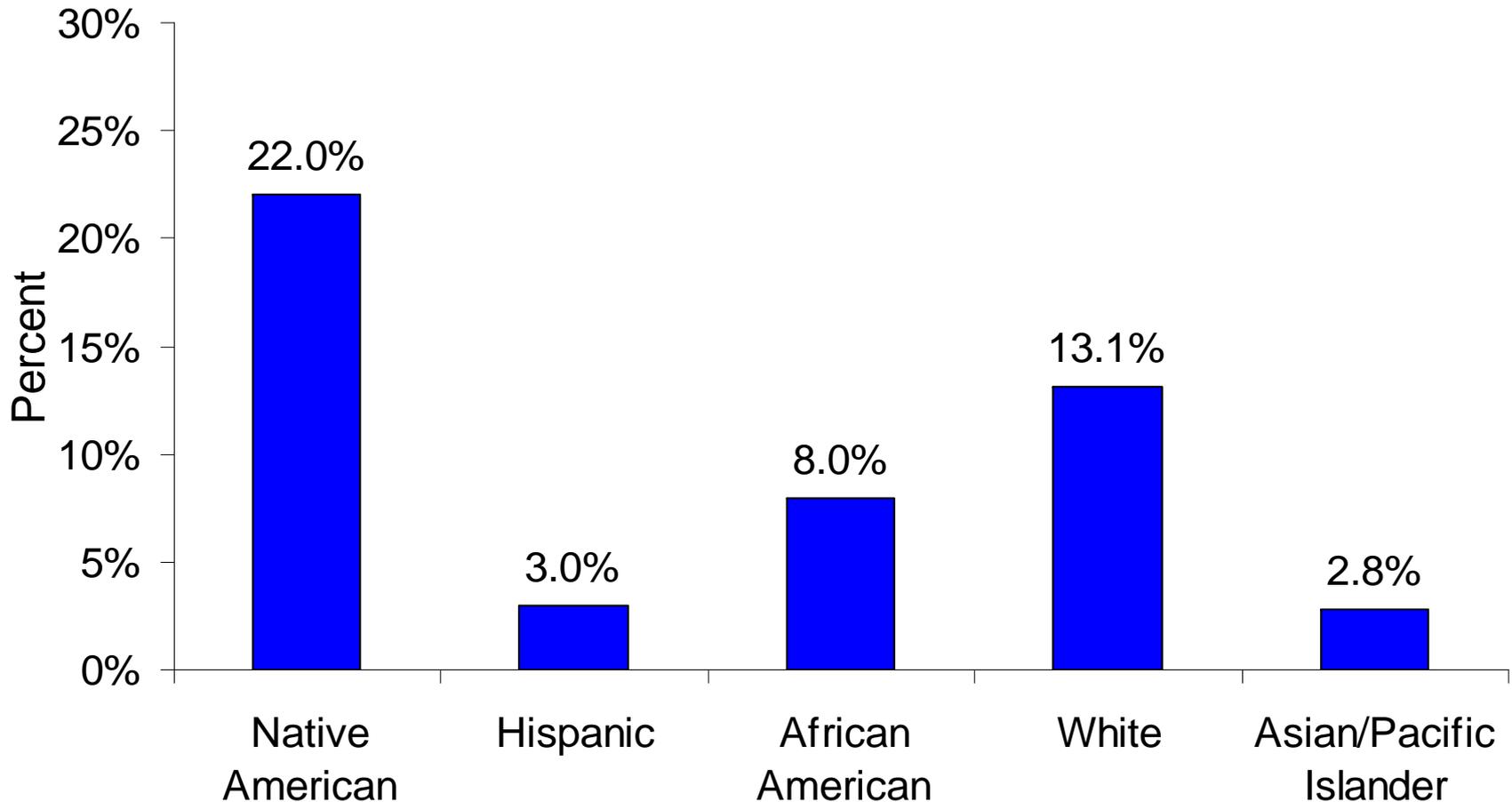


Obesity and Race/Ethnicity

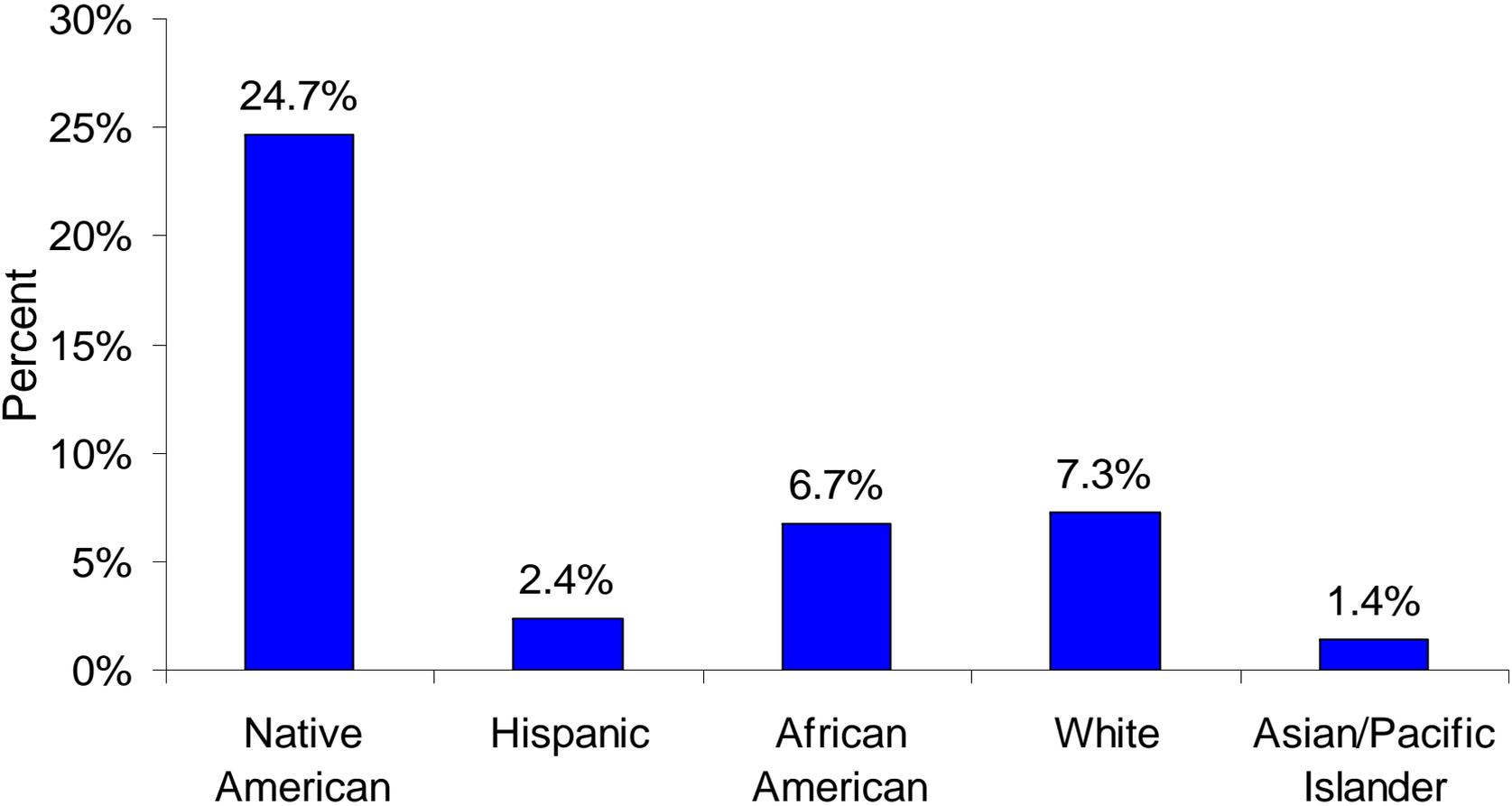
Washington Women with 2006 Births



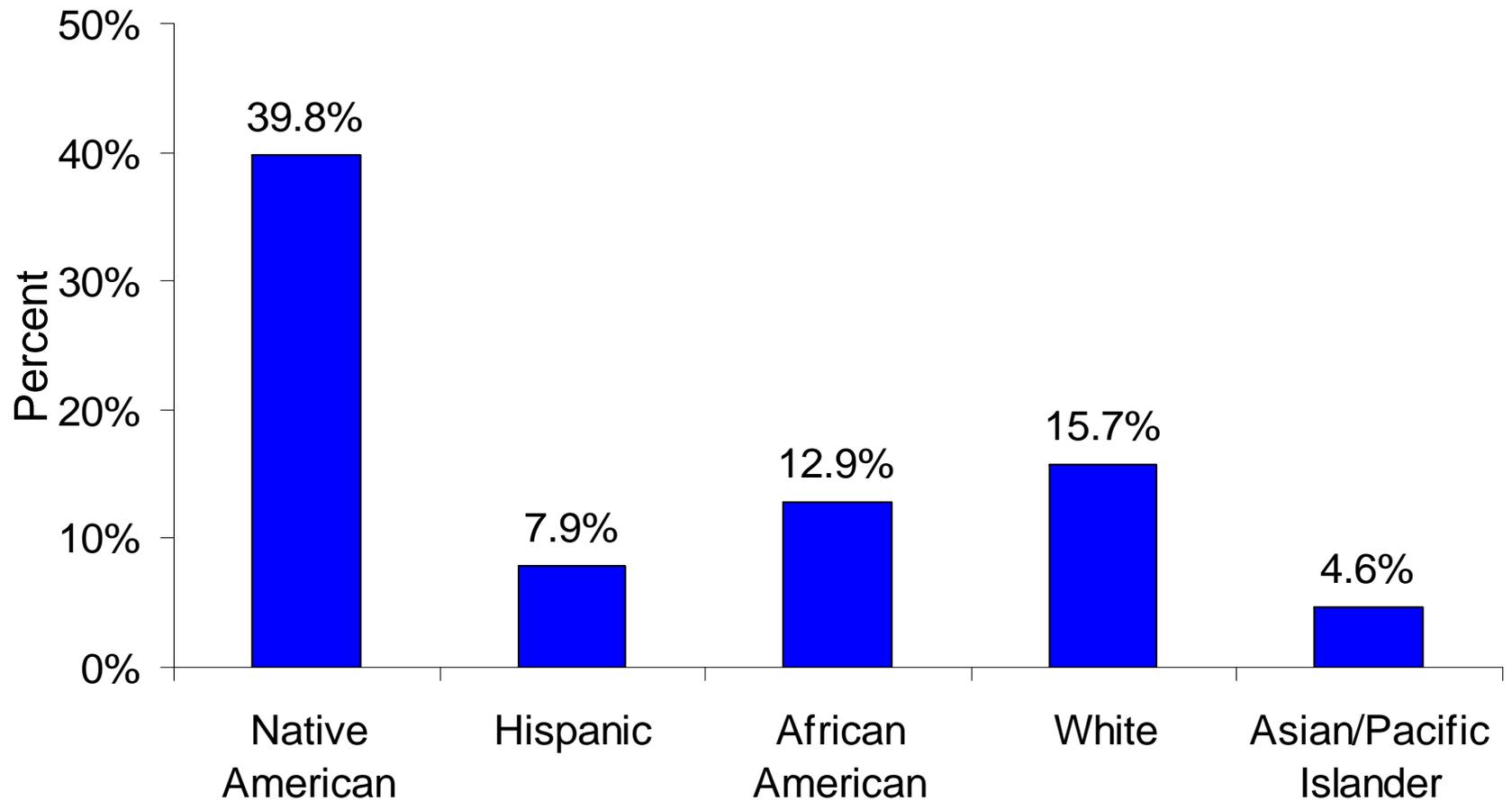
Smoking During Pregnancy Washington Women with 2006 Births



Substance Abuse and Race/Ethnicity Washington Medicaid Women With 2006 Births



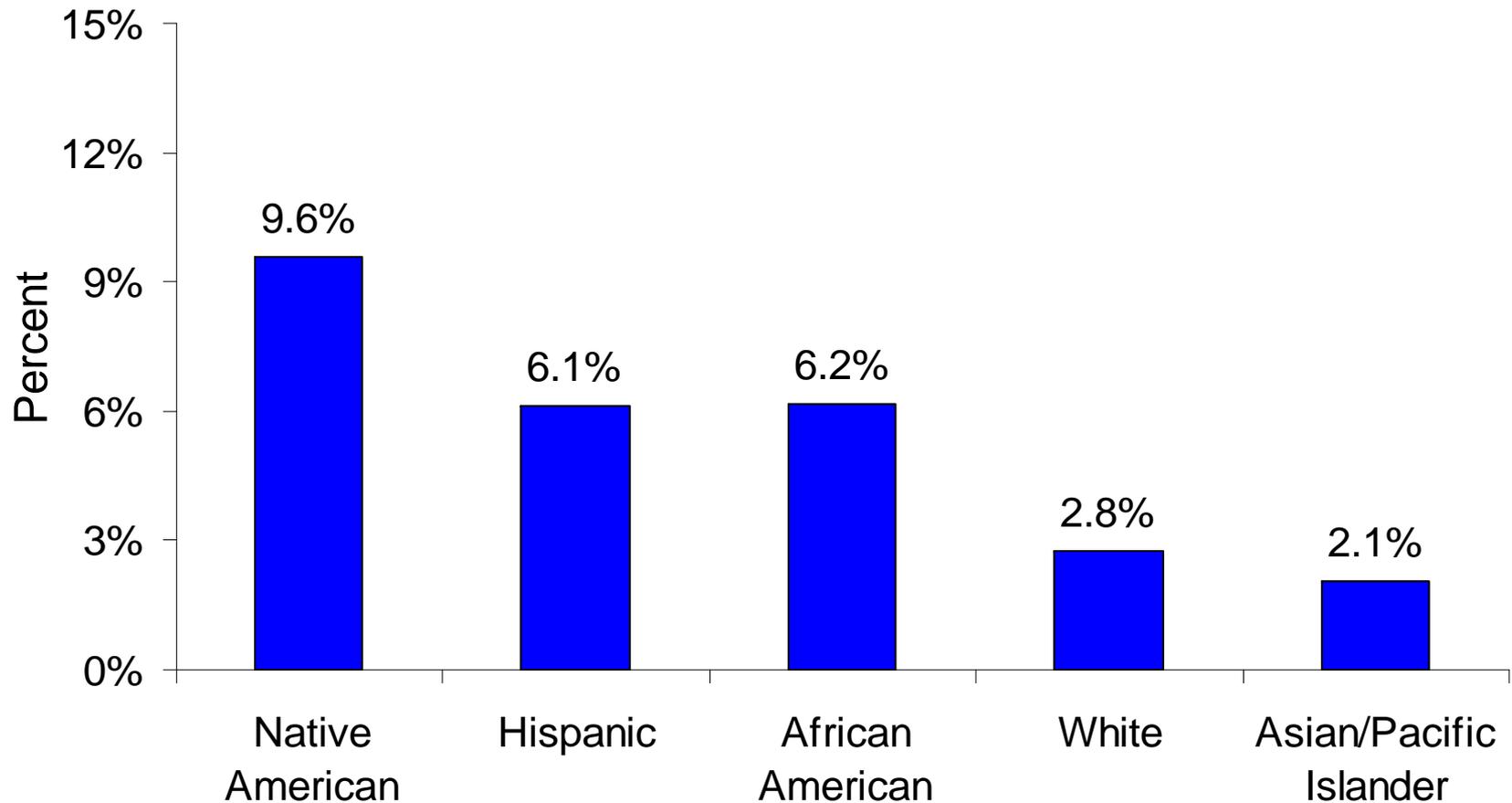
Mental Health Diagnosis Washington Medicaid Women With 2006 Births



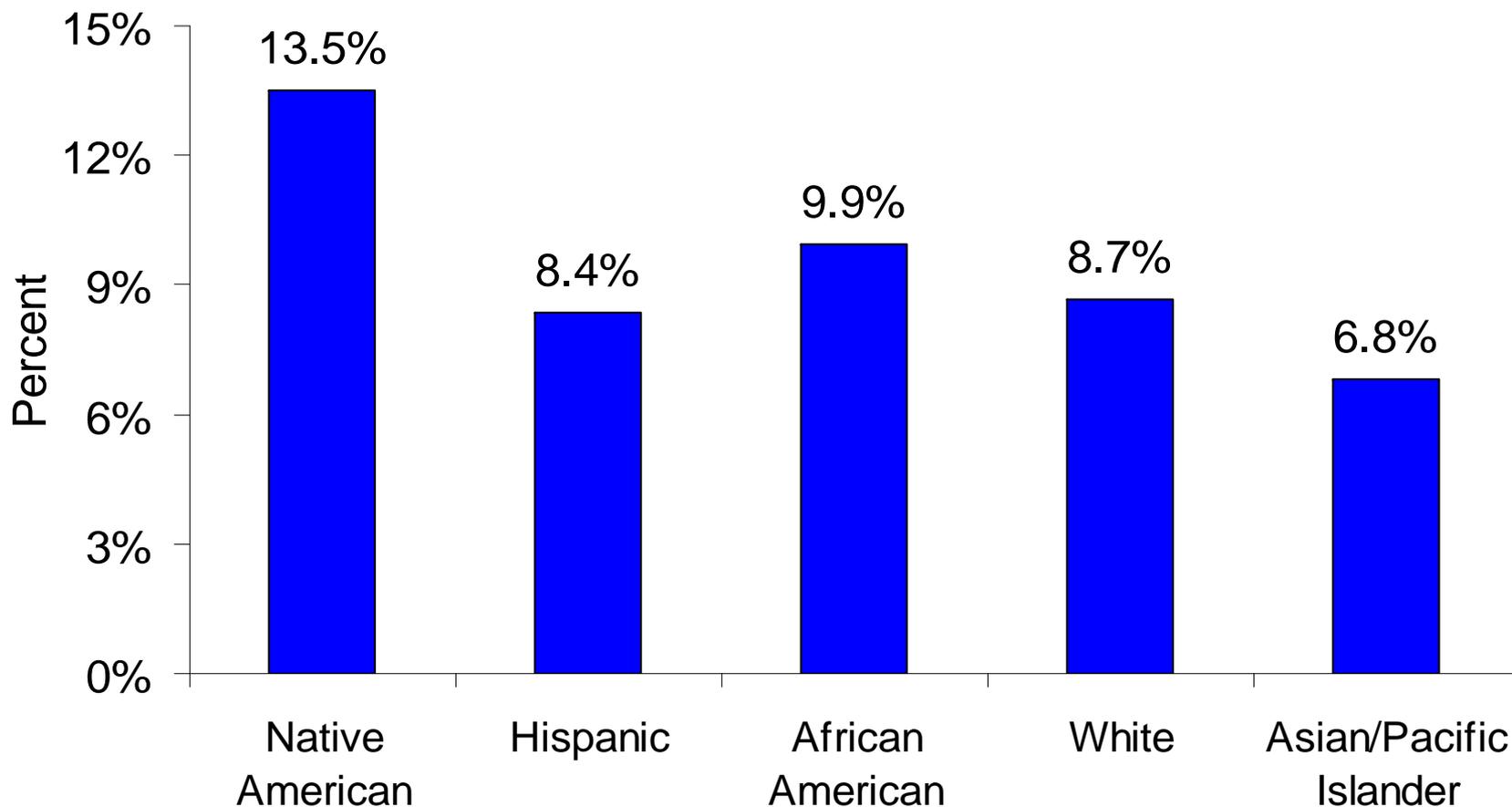
Partner Abuse Before or During Pregnancy

WA Women with Deliveries 2004-2006

PRAMS/FSDB

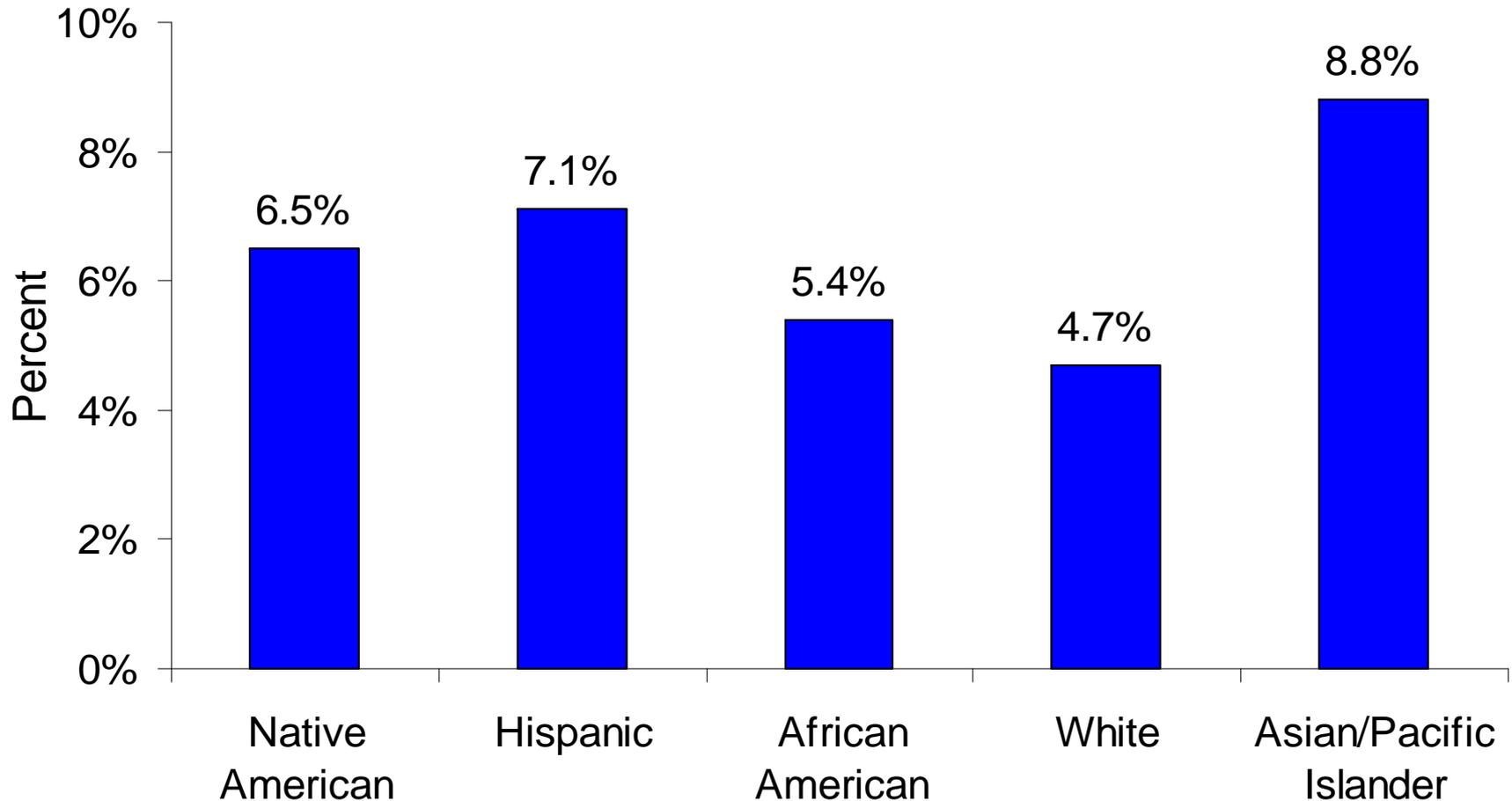


Postpartum Depression WA Women with Deliveries 2004-2006 PRAMS/FSDB

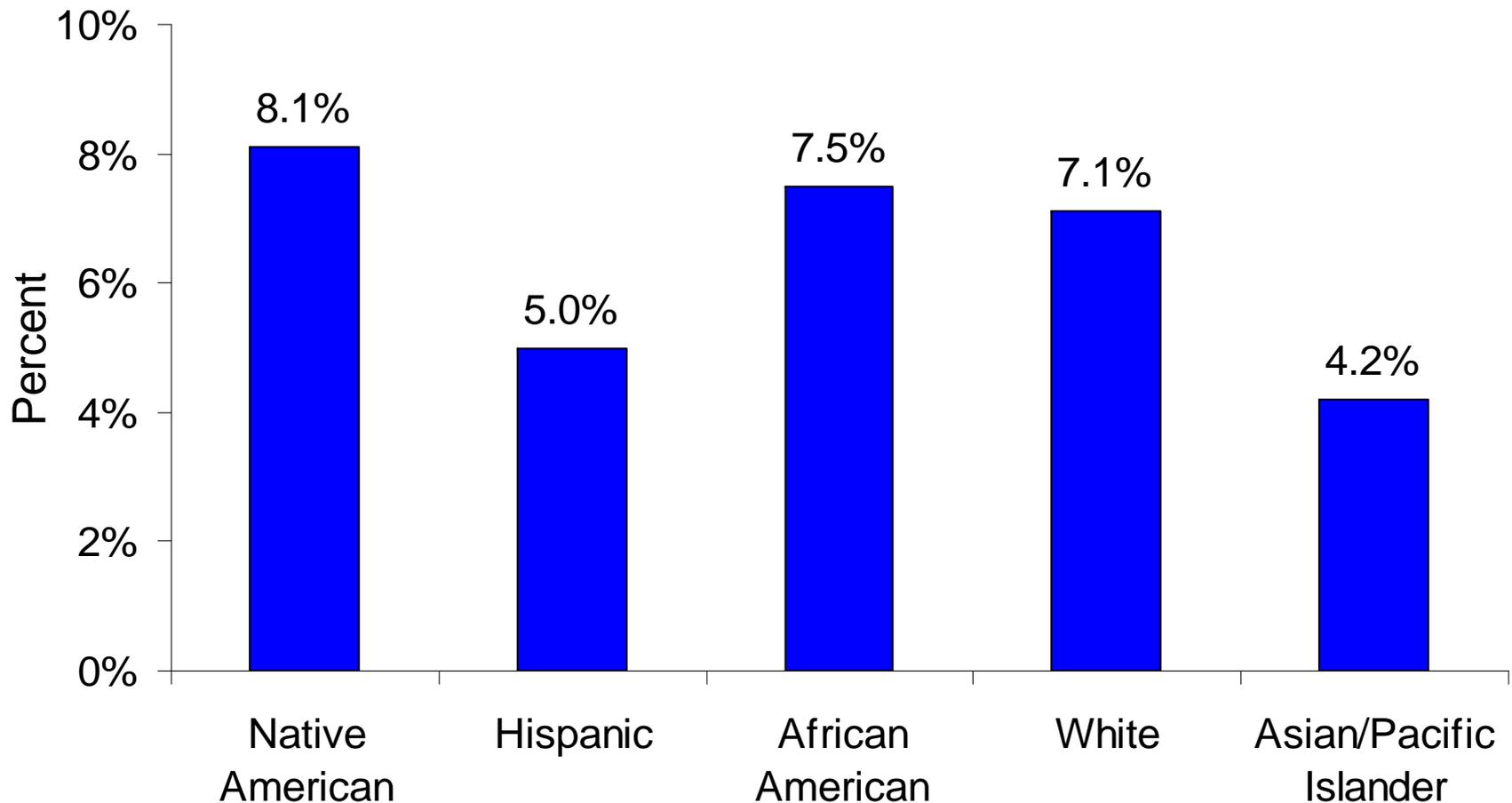


Diabetes and Race/Ethnicity

Washington Women with 2006 Births

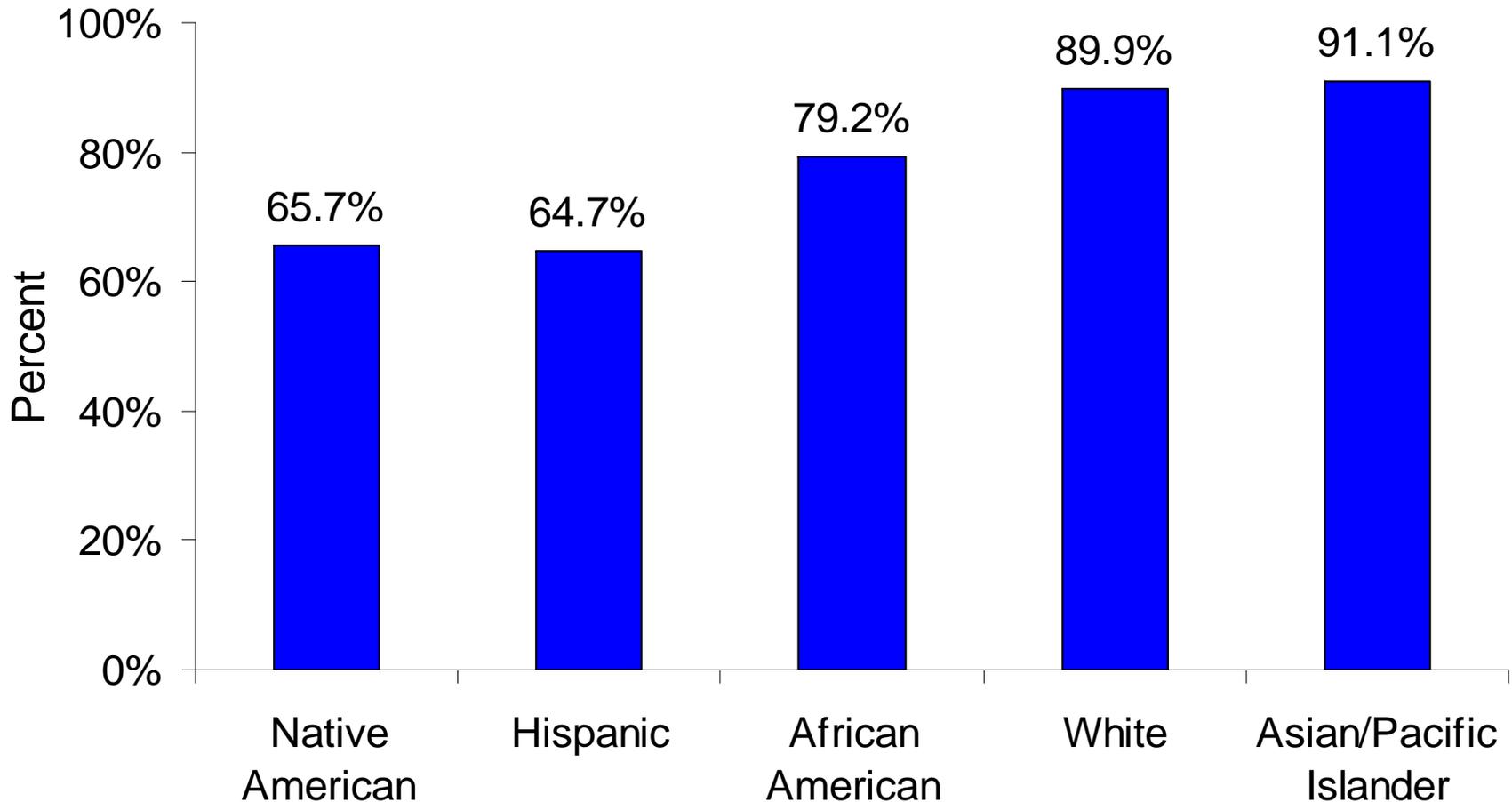


Hypertension and Race/Ethnicity Washington Women with 2006 Births

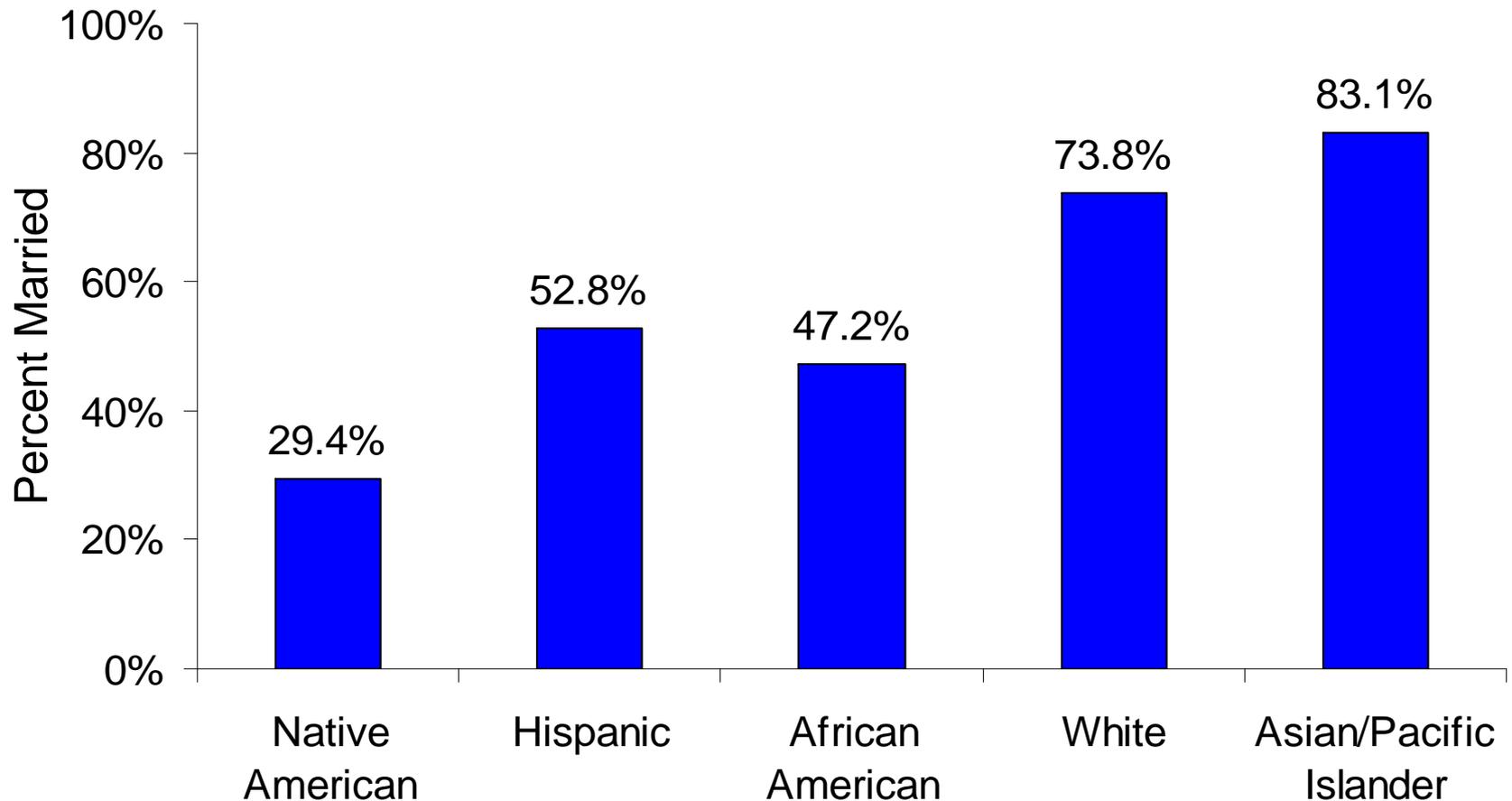


High School Graduates Washington Women with 2006 Births

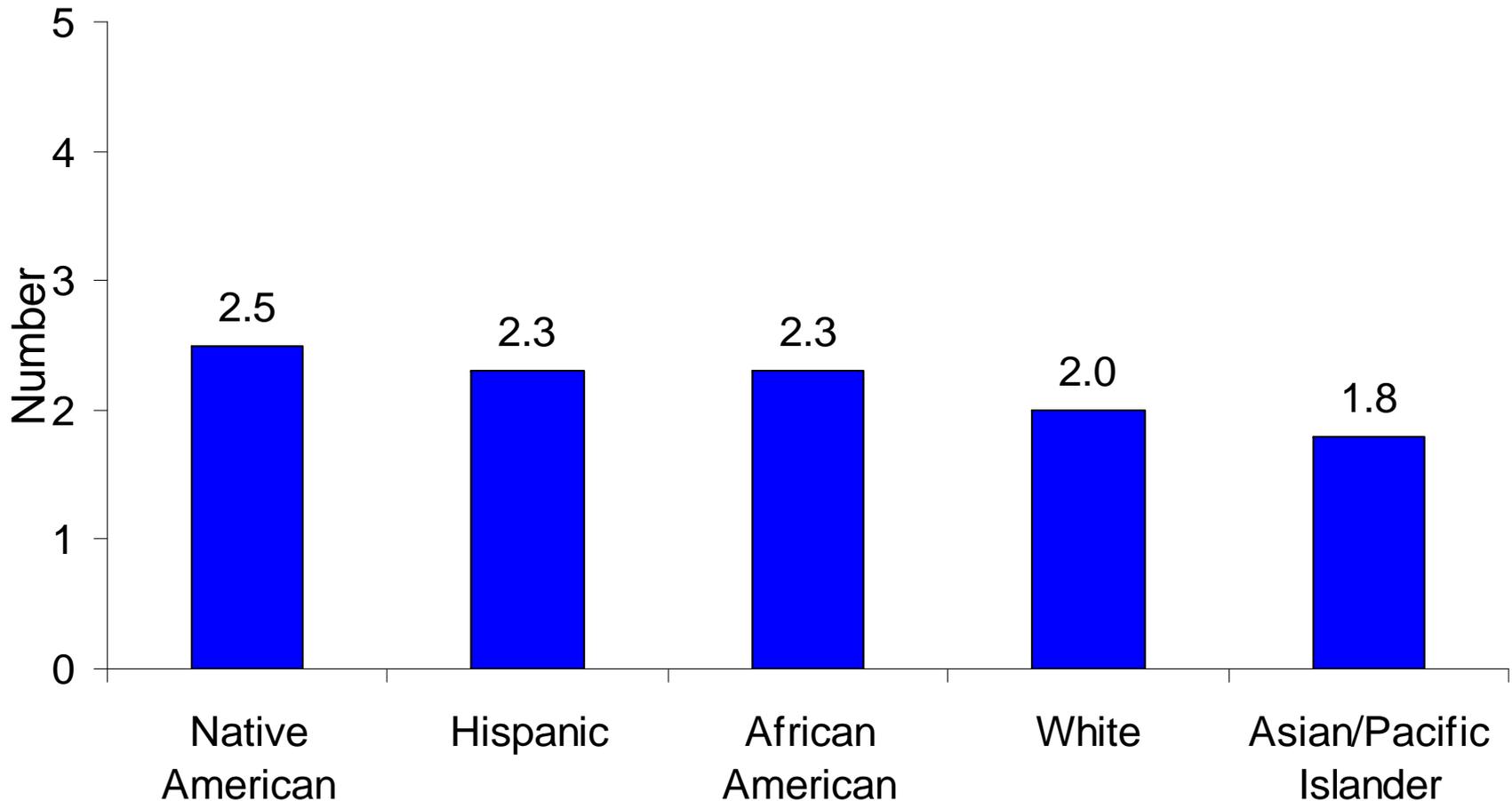
(excludes Medicaid Non-Citizens)

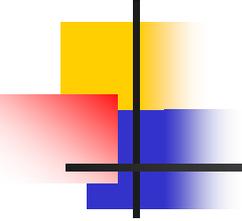


Marital Status and Race/Ethnicity Washington Women with 2006 Births

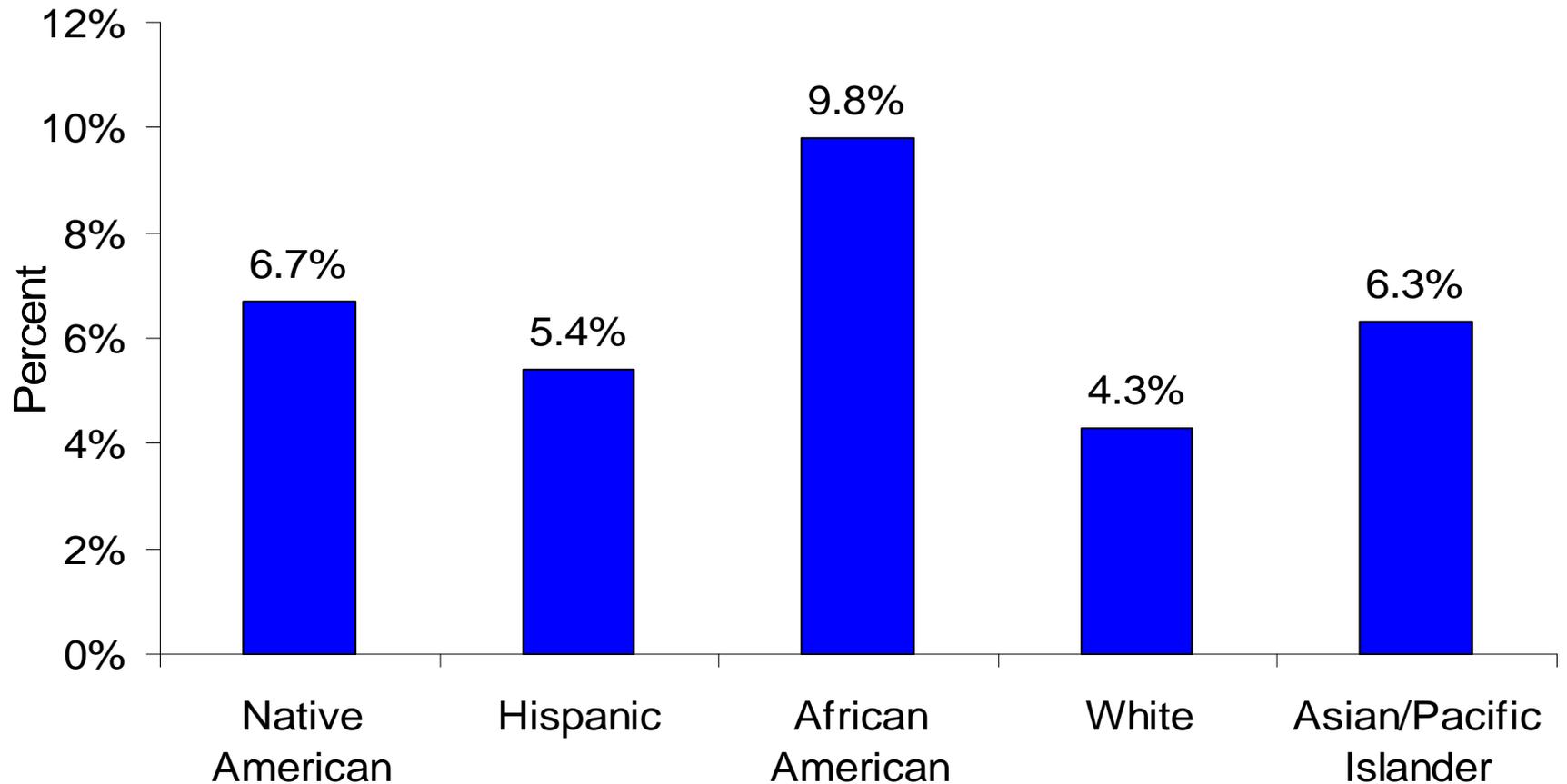


Average Number of Kids Washington Women with 2006 Births





Low Birth Weight 2006 Washington Births



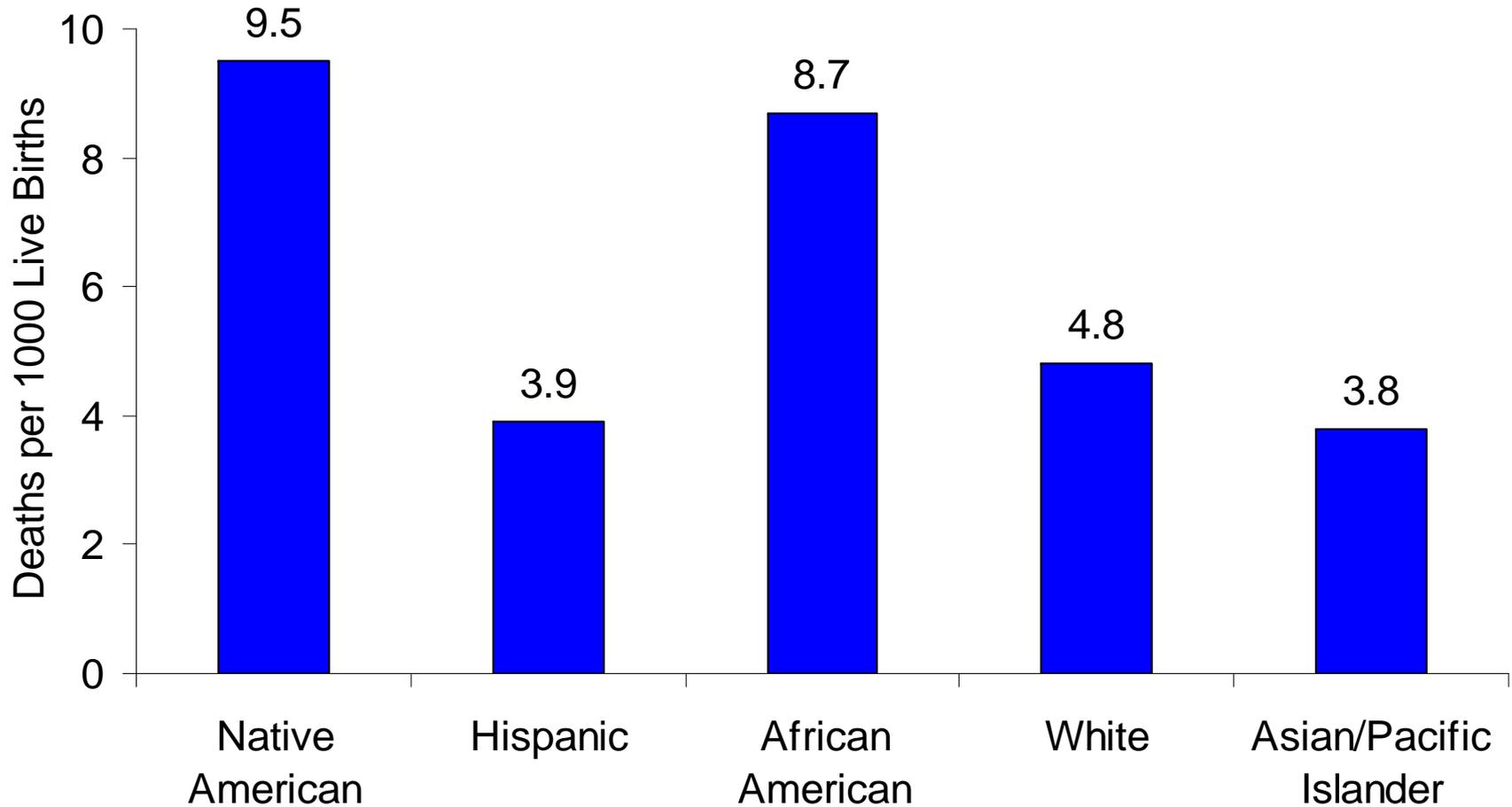
What Accounts for the Difference?

	<u>White</u>	<u>Native American</u>
LBW	4.3%	6.7%
Relative Risk	1.0	1.6 (p <0.001)
If we control for:	Substance Abuse Mental Health	RR no longer significantly higher.
If we control for:	HPTN, prior LBW, PNC, Wt gain, Smoking, BMI, Parity_Age, gender, Prior preterm, Prior births Education, Medicaid	RR remains significantly higher.

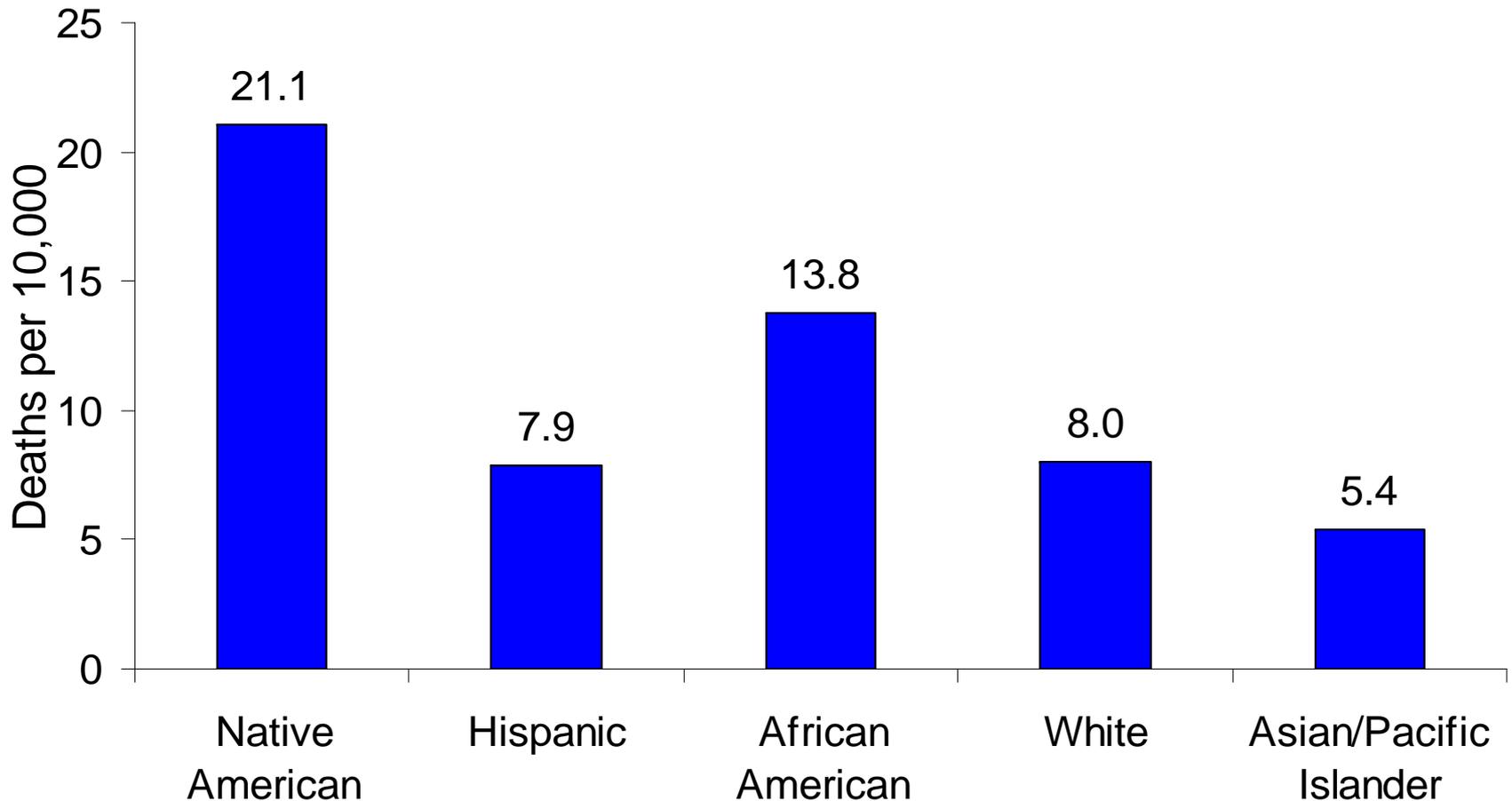
What Accounts for the Difference?

	<u>White</u>	<u>African American</u>
LBW	4.3%	9.8%
Relative Risk	1.0	2.3 (p <0.001)
If we control for:	HPTN, prior LBW, PNC, Wt gain, Smoking, BMI, Parity_Age, gender, Education, Medicaid Prior preterm, Prior births, Medicaid, Substance abuse, Mental health	RR remains significantly higher.

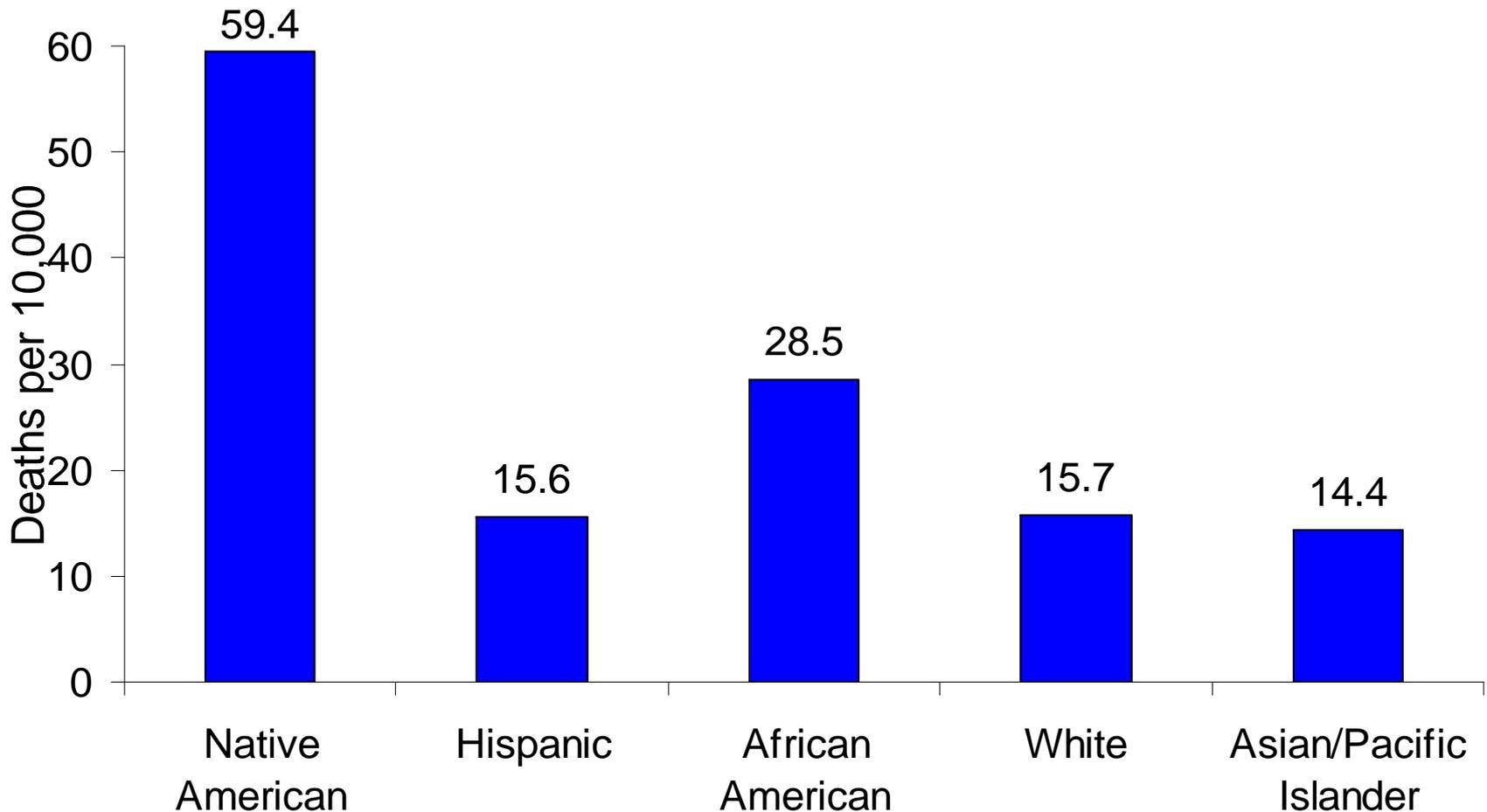
Infant Mortality Rate and Race/Ethnicity 2005 Washington Births



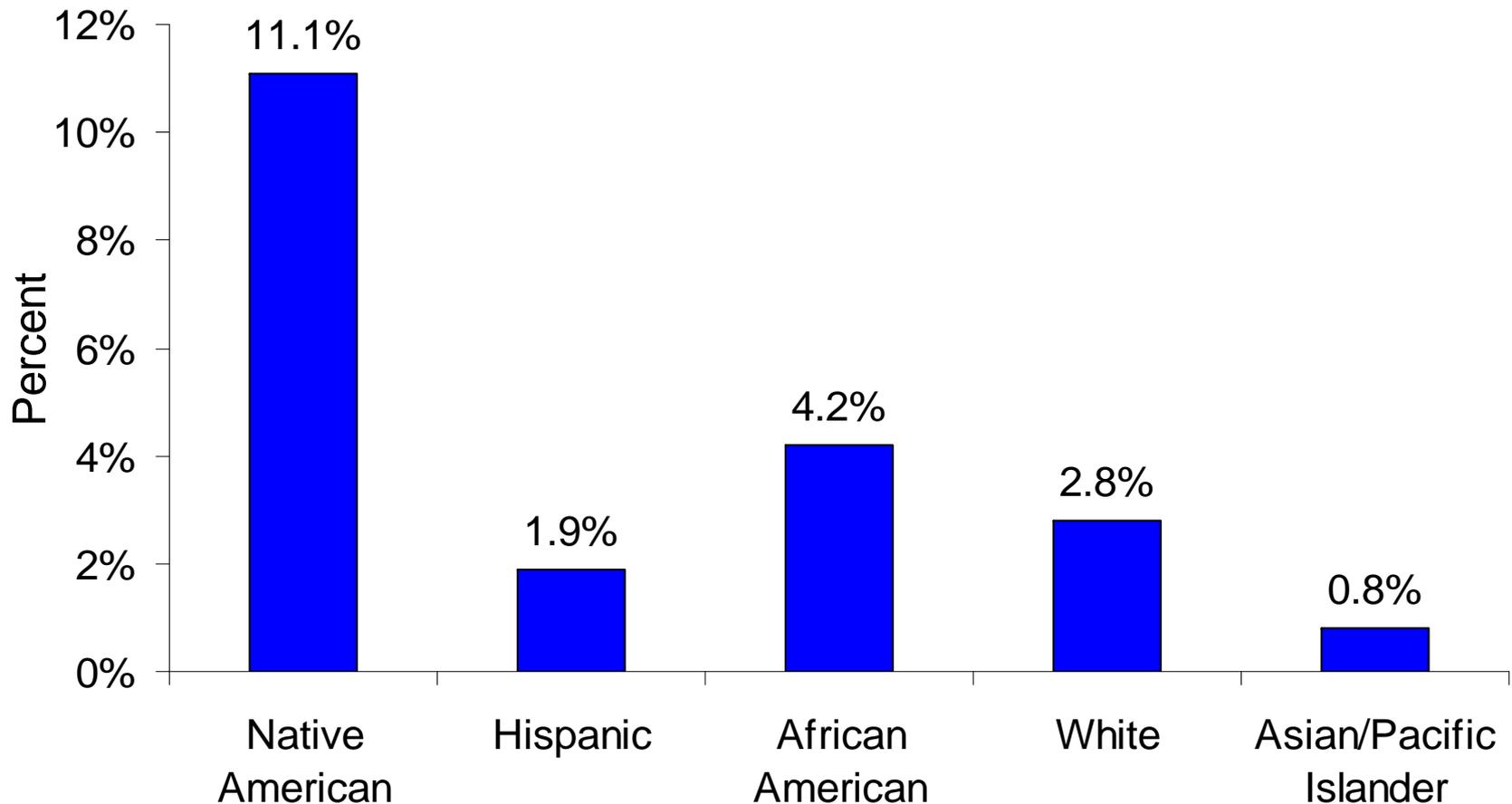
Child Deaths (Age One to Four) Washington Children Born 1999-2001



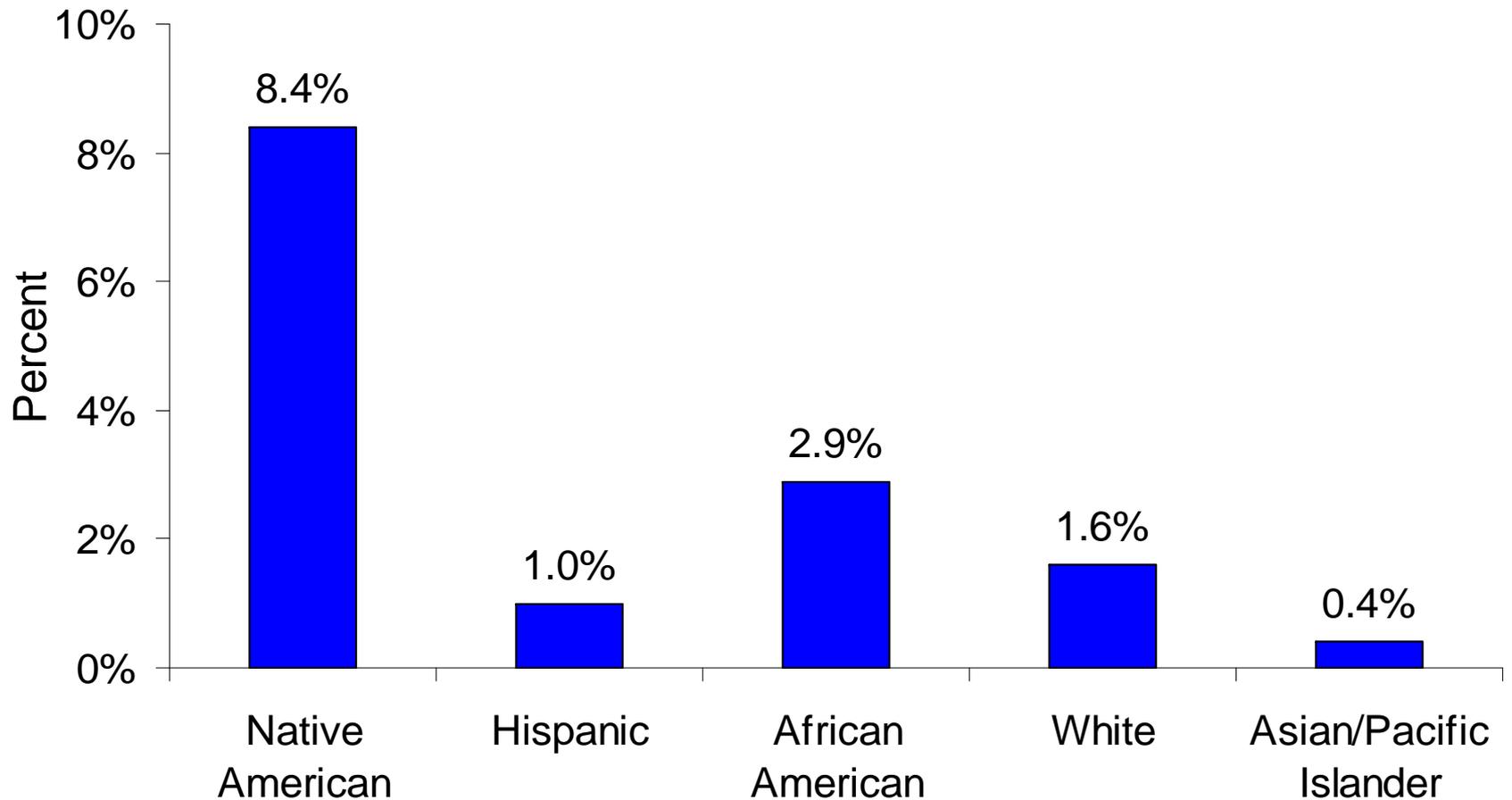
Five Year Maternal Mortality WA Women with Deliveries 1996-2000



Accepted CPS Referrals First Year of Life 2005 Washington Births



Out of Home Placement First Year of Life 2005 Washington Births



Social Environment Logic Model

Conditions amenable to intervention

Determinants

**Equity and
Social Justice**

Societal Resources:

- Standard of living
- Culture and history
- Social institutions
- Built environments
- Political structures
- Economic systems
- Technology

**Physical
Environment**

**Neighborhood Living
Conditions**

**Community Development and
Employment**

**Social Cohesion, Civic
Engagement
and Collective Efficacy**

**Prevailing Community
Customs, Norms, and
Processes**

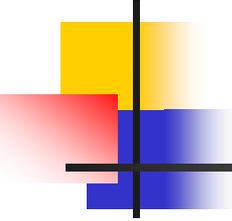
**Opportunities for Learning
and Developing Capacity**

**Health Promotion, Disease
and Injury Prevention, and
Healthcare Opportunities**

Outcome

**Healthy
Communities**

The *Community Guide's* social environment and health model



Participant Feedback for Groups

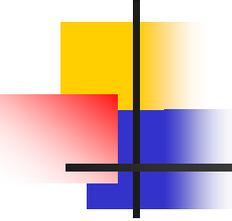
Young Women's Group (Port Gamble S'Klallam)

When asked what they would do differently:

“Try to be more healthy and plan my next pregnancy.” (n=2)

What they learned in this group that they didn't know before:

“I learned about ways I can improve my health, ways of dealing with stress, and alternatives to unhealthy behaviors.”

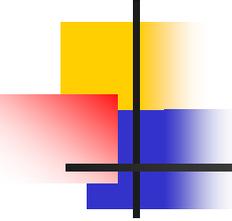


The Will To Be Well

A Portland, OR, push by blacks for blacks makes strides in health and beyond

The program owes its success to community members taking charge of their health.

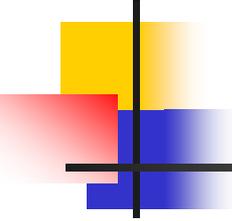
--Corliss McKeever (president and CEO of the African American Health Coalition) in The Oregonian, November 1, 2007



Poverty is embodied in lack of print as well as lack of food.

	<u>Population</u>	Public Library <u>Books</u>
United Kingdom	60 million	116 million
India	1.1 billion	36 million

Source: Andrew Grafton
New Yorker magazine 11/5/2007



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