Steering Committee on Reduction of African American Child Deaths

August 16, 2017
2:15 p.m. – 4:15 p.m.
South Sacramento Christian Center

2:15 p.m. Welcome and Updates
Kindra Montgomery-Block, Program Officer, The Center

2:30 p.m. Evaluation Update
Leslie Cooksy, Evaluation Director, The Center

3:00 p.m. Community Incubator Lead Presentation: South Sacramento Christian Center
Les Simmons, Community Incubator Lead

3:30 p.m. Samuel D. Proctor Institute Update
Proctor Team

4:00 p.m. Announcements: Important Dates and Events
- Communication Workgroup Members Needed!
- August 28–September 1, 2017 – Legacy Camp
  Location: Grizzly Creek Ranch, Portola, CA
- September 21, 2017 – Profound Purpose Institute
  Location: Sierra Health Foundation, 1321 Garden Highway
  Time: 9:00 a.m. – 4:00 p.m.
- October 18, 2017 – Steering Committee Meeting
  Location: Sierra Health Foundation, 1321 Garden Highway
  Time: 2:15 p.m. – 4:15 p.m.

4:10 p.m. Public Comment

4:15 p.m. Adjourn
Steering Committee on Reduction of African American Child Deaths (RAACD)

Date: August 16, 2017
2:15 p.m. – 4:15 p.m.
South Sacramento Christian Center
7710 Stockton Blvd.
Meeting Summary Notes

Meeting Attendance

Steering Committee Members Present: Pastor Alice Baber-Banks, Debra Cummings, Dr. Ethan Cutts, Captain Bobby Davis, Gladys Deloney, Paris Dye, Linda Fong-Somera, Steven Garrett, Dr. Olivia Kasirye, Aliane Murphy-Hasan, Tina Roberts, Essence Webb

Steering Committee Members Not Present: Pastor Robert Jones

Excused Absence: Stephanie Bray, Julie Davis-Jaffe, Diane Galati, Dr. Albina Gogo, Chet Hewitt, Keith Herron, Judge Barry Loncke, Kim Pearson, Kim Williams, Natalie Woods Andrews, Marlon Yarber

Center Staff: Kindra Montgomery-Block, Madeline Sabatoni

Guests: Les Simmons, South Sacramento Christian Center; Jacqueline Duncan, CPS; Abram Pan, California Northstate College of Medicine; Troy Willford, Our Kids Community Breakfast Club; Gina Roberson, TARC; Helen Zheng, Sacramento County Public Health; Joseph Johnson, South Sacramento Christian Center; Tsion Kidanie, Sacramento County Public Health; Jamie White, Sacramento County Public Health; Samantha Slaughter, Breastfeeding Coalition; Michele Darling, LPC Associates; Kristina Karson, LPC Associates; Shannon Williams, LPC Associates; Tracey Weld, LPC Associates; Kamal Kheura, Consultant with LPC Associates; Jara Lee, CPS; Tosha Vlian, African American Prenatal Health; Kenya Fagbemi, Black Mothers United; Dee Emmert, Sac ACT; Pamela Harris, Sacramento County Public Health; Patricia Roundtree, Sac ACT; Eva Corona, Sacramento County DHA; Bobby Dalton G. Roy, Sacramento County Children’s Coalition; Katrina Simmons, South Sacramento Christian Center; Lamar Thorpe, Greater Sacramento Urban League; Sandra Simpson, Health Net

Meeting Summary

Meeting called to order: 2:11 p.m.

Steering Committee Updates:
Kindra Montgomery-Block, Program Officer, The Center, opened the meeting with an overview of the agenda and introductions. Kindra thanked the South Sacramento Christian Center for hosting the meeting.
It was announced that three additional members have been approved by the County Board of Supervisors: Steven Garret, filling the Advocates Seat; Julie Davis-Jaffe, filling the Workforce Development Seat; and Dr. Albina Gogo, filling the Health Care Systems seat for U.C. Davis.

**Evaluation Update**

*Kindra Montgomery-Block* presented an overview of the evaluation topics to be discussed (see attached slide).

*Shannon Williams, Research Director, LPC Associates,* gave a presentation on the Community Indicator Report (see attached). The report provides baseline data and community indicators that surround the deaths of children. The next steps include dissemination and a webinar for Community Incubator Leads and the greater community. The Steering Committee will host a working group regarding distribution of the report.

*Tsion Kidanie, Graduate Student, and Jamie White, Epidemiology Program Manager, Sacramento County Public Health,* gave a presentation on the Perinatal Periods of Risk Assessment (PPOR) conducted over the summer (see attached slides). Sacramento County Department of Public Health will release the report on its web site when completed and will continue this work, looking deeper at the periods of risk.

It was noted that heart disease is related to deaths related to lowbirth rate, and that treating heart disease in younger women may impact deaths related to perinatal conditions.

*Kindra Montgomery-Block* gave a presentation on the Community Incubator Leads progress reports and Quality Assessment site visits (see attached slides).

**Community Incubator Lead Presentation: South Sacramento Christian Center**

*Katrina Simmons, Project Lead,* shared the work of the South Sacramento Christian Center, the Community Incubator Lead for Valley Hi (see attached slides).

**Samuel D. Proctor Institute Update**

*Kindra Montgomery-Block and the Proctor Team,* gave an overview of their experience and presentation at the Children’s Defense Fund’s Samuel D. Proctor Institute in July (see attached slides). These experiences will be used to help plan the Gathering for GLORY conference in April 2018. Steering Committee members who are interested in joining the planning team are welcome.

**Announcements:**

The Sacramento City Council will vote on the Advance Peace program, which focuses on community violence, on September 19. On September 9, the Reinvestment Coalition will host a community forum highlighting this program.

The Department of Human Assistance is closing the Bowling Green location’s lobby. For those who are trying to reach a staff worker, it is best to call 916-874-3100.
The NAACP is hosting a Rhythm & Blues Festival on September 2.

The Steering Committee is in need for volunteers to join the Communications Workgroup.

Upcoming events:

- August 28–September 1, 2017 – Legacy Camp  
  Location: Grizzly Creek Ranch, Portola, CA

- September 21, 2017 – Profound Purpose Institute  
  Location: Sierra Health Foundation, 1321 Garden Highway  
  Time: 9:00 a.m. – 4:00 p.m.

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**Public Comment:**
*Samantha Slaughter,* *Sacramento Breastfeeding Coalition,* announced that on October 31, the Breastfeeding Coalition will be hosting an event on Reducing African American Mortality Through Breastfeeding. The event will highlight the importance breastfeeding can play in women and infant’s health. Samantha will forward the flyer to include in the Wednesday Weekly Blast.

*Pastor Chryrell English* noted that she was able to help a family in need through the services at a Community Incubator Lead, which strengthened her relationship as a pastor.

**Meeting adjourned:** 4:48 p.m.

Tours of the Valley Hi Community Incubator Lead (CIL) site were available.
RAACD | REDUCTION of AFRICAN AMERICAN CHILD DEATHS

Steering Committee Meeting

AUGUST 16, 2017
EVALUATION OVERVIEW

- FRAMEWORK
- COMMUNITY INDICATORS BASELINE REPORT
- PERINATAL PERIODS OF RISK
- PROGRESS REPORTS
- QUALITY ASSESMEN TS
- NEXT STEPS
1 Sacramento County
   - Advocacy & Policy
   - Investment & System Impact
   - Data-driven Accountability
   - Communications Information Systems
   - Coordinated Systems of Support

2 Seven Neighborhoods
   - Advocacy & Policy
   - Investment & System Impact
   - Data-driven Accountability
   - Communications Information Systems
   - Coordinated Systems of Support

3 AA Families
   - Decreasing Perinatal Conditions
   - Promoting Infant Safe Sleep
   - Reducing Child Abuse & Neglect
   - Reducing 3rd Party Homicides

10% to 20% reduction in deaths among African American children in Sacramento County by 2020
Purpose:

• To assess the alignment of the work of the Community Incubator Leads (CIL) with the indicators of the quality of in the RAACD Implementation Plan

Process:

• Site visits by Quality Assessment teams
• Evolution of teams to include CIL staff visiting each other’s sites
Quality Assessments

Dimensions

• Mission focus
• Engaged Leadership
• Partnerships
• Community Engagement
• Community Capacity-Building

• Youth-Centered
• Transparency and Fairness
• Communications
• Data Sharing and Use
## Quality Assessments

### Rating Scale

<table>
<thead>
<tr>
<th>Beginning - 1</th>
<th>Emerging - 2</th>
<th>Developing &amp; Integrating - 3</th>
<th>Exemplary &amp; Sustaining - 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minimal to no evidence that supports implementation as evidenced by observations, documentation and data.</td>
<td>Minimal evidence toward supporting implementation as evidenced by observations, documentation and data.</td>
<td>Evidence indicates quality development and integration toward implementation as evidenced by observations, documentation and data.</td>
<td>Evidence indicates high-quality implementation and moving toward long-term sustainability as indicated by extensive exemplary documentation, observations and data.</td>
</tr>
</tbody>
</table>
Quality Assessments

Areas that Shine – December ’16 – July ‘17

• Almost every CIL improved on almost every dimension
• Dimensions with greatest improvement (across CILs):
  • Community capacity-building
  • Youth-centered
  • Community engagement
  • Partnerships
Quality Assessments

Areas for Growth – December ’16 - July ‘17

• Every CIL has room to grow on every dimension

• Dimensions with the lowest average scores:
  • Data sharing and use
  • Transparency and fairness
  • Communications
Quality Assessments

Next Steps

• Provide individual reports to CILs with follow up visits for tailored guidance
• Continue to provide technical assistance and support through Profound Purpose Institutes and TA providers
• In the December 2017 quality assessment, engage CILs in quality assessments to increase cross-site learning
Progress Reports

Purpose:

• Document the nature and reach of the CIL activities
• Capture stories of accomplishments and lessons learned
• Reinforce quality dimensions

Process:

• CILs complete on-line form
• Progress report was simplified in 2017
• LPC provides forms on Google Docs to help prepare data for report
Mission Focus and Partnerships

- Increased ability to describe how interventions address causes of death
- Increased clarity around partnerships and roles of partners in mission-focused programs
- Continued challenges in documenting numbers reached by interventions
  - Breaking BCLC participants out from all participants
  - Asking partners to use BCLC forms
  - Shift in types of data requested in progress report
Progress Reports

Mission Focus and Partnerships

• Increased ability to describe how interventions address causes of death
• Increased clarity around partnerships and roles of partners in mission-focused programs
• Increased cross-CIL partnerships
• Strong relationships with MDT members
• Complementary services
  • CIL connected family to grief counseling; county staff connected family to public services
Community Capacity-Building and Engagement

• Over 50 new adult leaders recruited by CILs for:
  • Community Leadership Roundtable members
  • Event volunteers
  • Participatory Action Research adult allies for youth
  • Community outreach workers
• Other engagement strategies
  • Community listening sessions
  • Using community asset mapping to identify allies
Youth-Centered

• Over 40 youth leaders recruited and taking on leadership roles for the first time:
  • Participatory Action Research
  • Healing circles
  • Neighborhood outreach
  • Event planning
  • BCLC presentations to other youth
Communications

- All CILs use Facebook for communications about BCLC – reach more than 8,000 members
- Other methods include Twitter, Instagram, texts, and e-newsletters
- CILs are developing BCLC communication plans to build a county campaign
Engaged Leadership

• Improvements in quality assessment scores
• Participation in Profound Purpose Institutes and use of the information
  • Incorporate information into presentations to the community
  • Share with staff and neighborhood partners
  • Provide information in newsletters
Transparency and Fairness

- CILs asked to rate themselves:
  - Clear and fair procedures for decision making
  - Transparent rationale for decisions, actions and plans
  - Accessible information about processes, actions, decisions, and plans
  - Documented and fair processes for engaging partners
- Average score (4 point scale) = 3 “procedures need a little work”
Data Collection and Use

• Challenges
  • Identifying African American participants in interventions open to all (such as community events like Safe Passage Walks on last day of school)
  • Getting community partners to track the same data in the same way
  • Capturing consistent data across a wide range of programs
“… a youth from our group bravely stood before the audience and expressed his frustration with the planning and implementation of the program. He was frustrated with the overpowering presence of adults, politicians, and organizations represented was the typical adult-dominant event he wasn't interested in being a part of. The heart and passion of this young man came through as he fought back tears from the pain he and his peers were feeling from the killing of a friend. Hearing his words, seeing his pain and frustration, and feeling the energy in the room change from a bustle to near silence reminded many of us that if we are going to truly be youth centered and focused on youth social justice, the youth must be part of the planning and implementation of our movement.”
“Our Biggest ‘Aha’ Moment”

“...we are realizing that we do not have a deficit of services in our area, but the real disconnect between the community connecting and showing up to get access to the services provided. There is a need to transform our community in a way that not only fill the gaps in missing services but empowering our community to utilize the resources and services that are available to and for them.”
Progress Reports

Next Steps

• Complete summary of progress report data
• Continue to provide technical assistance through LPC
• Use the accomplishments and lessons shared in BCLC communications
PROCTOR INSTITUTE

GOALS:

- LEARN FROM OTHERS
- GET INSPIRED
- PLAN GLORY 2018
- PROVIDE INFORMATION ON THE BLACK CHILD LEGACY CAMPAIGN TO A NATIONAL AUDIENCE
- BUILD DEEPER CONNECTIONS BETWEEN RESTORATIVE JUSTICE AND THE COMMUNITY LEADERSHIP ROUNDTABLE
THURSDAY: Mobilizing Leaders for Healthy Communities of Color: Voices, Power, Promise

The chance to attain measurable improvements in the lives of youth of color is within grasp. Thanks to the commitment of leaders across sectors — faith based organizations, grassroots non-profits, civic champions and philanthropy — long-term, place-based efforts to catalyze systemic change are taking root in communities throughout the country. Designed to advance equity through policy and systems change, the Sacramento County Steering Committee on the Reduction of African American Child Deaths (RAACD) initiative managed by Sierra Health Foundation provides a powerful model for understanding and driving systemic and lasting change within a burgeoning field. The RAACD Steering Committee’s efforts focus on four issue areas: 1) Homicide related to Child Abuse and Neglect; 2) Third Party Homicide; 3) Deaths related to Perinatal Conditions; and 4) Infants Sleep Related Deaths. In this session participants will learn about the recognition of and investment in improving the significant disparities in health and life outcomes for African American children in Sacramento County and the philanthropic mobilization efforts that led to an eight million dollar reallocation of public funding and a five-year strategic plan. Participants will learn about successful models of intentional capacity, partnership and power building in vulnerable communities that have translated into local, regional and statewide policy change.

Facilitated by Kindra F. Montgomery-Block, Program Officer for the Sierra Health Foundation, Sacramento, CA.
HIGHLIGHTS:

- Dynamic Speakers
- Fellowship with Each Other
- Inspiration for Sacramento
THANK YOU.
Community Indicator Report

Child Death Data
- Leading Causes of Child Death
- 2020 RAACD Goals
- 5-Year County Trends

Community Baseline Indicators
- Preventable Death Risk Factors
- Social Determinants of Health

African American Disproportionality
- Child Death Rates & Community Indicators
In 2014, a total of 31 African American children died (based upon a 3-year rolling average).

<table>
<thead>
<tr>
<th>Cause</th>
<th>Count</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>Perinatal Conditions</td>
<td>8</td>
<td>27%</td>
</tr>
<tr>
<td>Infant Sleep-Related</td>
<td>7</td>
<td>23%</td>
</tr>
<tr>
<td>CAN Homicide</td>
<td>3</td>
<td>9%</td>
</tr>
<tr>
<td>3rd Party Homicide</td>
<td>2</td>
<td>5%</td>
</tr>
<tr>
<td>All Other Deaths</td>
<td>11</td>
<td>36%</td>
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</table>
### Measuring RAACD Goals

<table>
<thead>
<tr>
<th>2014 Leading Causes of Child Death</th>
<th>2020 RAACD Goals</th>
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</thead>
<tbody>
<tr>
<td><strong>All Child Deaths</strong></td>
<td>Decrease by 10-20%</td>
</tr>
<tr>
<td><strong>Perinatal Conditions</strong></td>
<td>Decrease by at least 23%</td>
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<tr>
<td><strong>Infant Sleep-Related</strong></td>
<td>Decrease by at least 33%</td>
</tr>
<tr>
<td><strong>CAN Homicide</strong></td>
<td>Decrease by at least 25%</td>
</tr>
<tr>
<td><strong>3rd Party Homicide</strong></td>
<td>Decrease by at least 48%</td>
</tr>
</tbody>
</table>
African American children in Sacramento County consistently have higher rates of death compared to all other racial groups. (rate per 100,000 children)
African American children in Sacramento County consistently have higher rates of death compared to all other racial groups. (rate per 1,000 births)
**Infant Sleep-Related**

5-Year County Trend & 2020 Reduction Goal

*African American* children in Sacramento County consistently have higher rates of death compared to all other racial groups. (rate per 1,000 births)
African American children in Sacramento County consistently have higher rates of death compared to all other racial groups. (rate per 100,000 children)

CAN Homicides
5-Year County Trend & 2020 Reduction Goal
African American children in Sacramento County consistently have higher rates of death compared to all other racial groups. (rate per 100,000 children)
## Community Indicators

<table>
<thead>
<tr>
<th>COMMUNITY INDICATORS</th>
<th>PERINATAL CONDITIONS &lt;1 YEAR</th>
<th>INFANT SLEEP RELATED &lt;1 YEAR</th>
<th>CAN HOMICIDE 0-17 YEARS</th>
<th>3RD PARTY HOMICIDE 0-17 YEARS</th>
</tr>
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<tbody>
<tr>
<td>Child Poverty</td>
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<tr>
<td>Educational Attainment</td>
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<tr>
<td>Prenatal Care</td>
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<td>☢️</td>
<td>☢️</td>
<td>☢️</td>
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<tr>
<td>Pre-Term Births</td>
<td>☢️</td>
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<tr>
<td>Low Birthweight</td>
<td>☢️</td>
<td>☢️</td>
<td>☢️</td>
<td>☢️</td>
</tr>
<tr>
<td>Child Abuse Allegations</td>
<td>☢️</td>
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<td>☢️</td>
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<tr>
<td>Foster Care</td>
<td>☢️</td>
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<td>Youth AOD ED Visits</td>
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<tr>
<td>Youth Assault ED Visits</td>
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<td>☢️</td>
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<tr>
<td>Juvenile Felony Arrests</td>
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</table>
## Community Indicators

**Children Living Below 100% of Poverty | 2014**

Percent of all *African American* & *All Other* Children

<table>
<thead>
<tr>
<th>Area</th>
<th>African American</th>
<th>All Other</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sacramento County</td>
<td>23%</td>
<td>42%</td>
<td>65%</td>
</tr>
<tr>
<td>RAACD Focus Area</td>
<td>36%</td>
<td>50%</td>
<td>86%</td>
</tr>
<tr>
<td>Arden-Arcade</td>
<td>27%</td>
<td>74%</td>
<td>101%</td>
</tr>
<tr>
<td>Del Paso/North Sac</td>
<td>43%</td>
<td>60%</td>
<td>103%</td>
</tr>
<tr>
<td>Fruitridge/Stockton</td>
<td>40%</td>
<td>65%</td>
<td>105%</td>
</tr>
<tr>
<td>Meadowview</td>
<td>38%</td>
<td>40%</td>
<td>78%</td>
</tr>
<tr>
<td>North High/FHF</td>
<td>34%</td>
<td>54%</td>
<td>88%</td>
</tr>
<tr>
<td>Oak Park</td>
<td>42%</td>
<td>48%</td>
<td>90%</td>
</tr>
<tr>
<td>Valley Hi</td>
<td>36%</td>
<td>41%</td>
<td>77%</td>
</tr>
</tbody>
</table>

Source: U.S. Census Bureau, 2014 American Community Survey 5-Year Estimates
In 2014, the 3-year rolling average child death rate was **83.8** for **African American** children and **31.4** for **All Other** children (per 100,000 children).

The ratio **83.8:31.4** translates to a disproportionality in African American child deaths. In 2014, the rate of African American child death was **2.7** times the rate of all other racial groups.

<table>
<thead>
<tr>
<th>2014 Leading Causes of Child Death</th>
<th>2014 AA Disproportionality</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Child Deaths</td>
<td><strong>2.7</strong> x all other racial groups</td>
</tr>
<tr>
<td>Perinatal Conditions</td>
<td><strong>1.8</strong> x all other racial groups</td>
</tr>
<tr>
<td>Infant Sleep-Related</td>
<td><strong>4.6</strong> x all other racial groups</td>
</tr>
<tr>
<td>CAN Homicide</td>
<td><strong>8.6</strong> x all other racial groups</td>
</tr>
<tr>
<td>3rd Party Homicide</td>
<td><strong>4.0</strong> x all other racial groups</td>
</tr>
<tr>
<td>Community Indicators</td>
<td>2014 AA Disproportionality</td>
</tr>
<tr>
<td>---------------------------------------------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>Juvenile Felony Arrests</td>
<td>7.6 x all other racial groups</td>
</tr>
<tr>
<td>Foster Care</td>
<td>4.1 x all other racial groups</td>
</tr>
<tr>
<td>Child Abuse Allegations</td>
<td>3.8 x all other racial groups</td>
</tr>
<tr>
<td>Youth Assault ED Visits</td>
<td>3.3 x all other racial groups</td>
</tr>
<tr>
<td>Youth AOD ED Visits</td>
<td>2.3 x all other racial groups</td>
</tr>
<tr>
<td>Child Poverty</td>
<td>1.8 x all other racial groups</td>
</tr>
<tr>
<td>Low Birthweight (&lt;5lbs 8oz)</td>
<td>1.8 x all other racial groups</td>
</tr>
<tr>
<td>Pre-Term Births (&lt;37 weeks)</td>
<td>1.6 x all other racial groups</td>
</tr>
<tr>
<td>Prenatal Care (initiated after 1st trimester)</td>
<td>1.2 x all other racial groups</td>
</tr>
<tr>
<td>Educational Attainment (Bachelor’s or higher)</td>
<td>0.7 x all other racial groups</td>
</tr>
</tbody>
</table>
Next Steps 2018

Update Community Indicators
Spring 2018

Produce 2 Data Dashboards
Fall 2017 | Crime & Neighborhood Safety
Spring 2018 | TBD
Perinatal Periods of Risk:
Disparities in Feto-Infant Mortality

RAACD Steering Committee
August 16, 2017

Tsion Kidanie, BS
Helen Zheng, MPH
Jamie S. White, MPH
Maternal Racial Disparities in Infant Mortality, Sacramento County, 2012-2014
Perinatal Periods of Risk (PPOR)
Perinatal Periods:

Cause of death is related to birthweight and age at death

PPOR helps communities move from data to action

- 500-1,499g Any age
- 1,500+g Fetal
- 1,500+g Neonatal
- 1,500+g Post-Neonatal
PPOR Community Readiness Assessment
Public Event held in June 2017
Phase I: Mortality Mapping

Target (Black)

- Fetal: Maternal Health/Prematurity 27 (4.5)
- Neonatal: Maternal Care 17 (2.85), Newborn Care 8 (1.34), Infant Health 22 (3.7)
- Postneonatal: Maternal Health/Prematurity

All over rate = 74/5964 = 12.4 per 1,000 fetal deaths and live births.

Reference (All other)

- Fetal: Maternal Health/Prematurity 86 (1.65)
- Neonatal: Maternal Care 68 (1.31), Newborn Care 56 (1.08), Infant Health 62 (1.19)
- Postneonatal: Maternal Health/Prematurity

All over rate = 272/52033 = 5.22 per 1,000 fetal deaths and live births.
Phase I: Excess Mortality

All over excess rate = 12.4 - 5.22
= 7.2 per 1,000 fetal deaths and live births.
Phase II: Kitigawa Analysis
Maternal Health/Prematurity Period

Excess Mortality
(Overall difference in Mortality between target and reference population)

Each Component tells us:

Birth Weight Distribution
Which population has the birth weight advantage?

Behavioral, social, health and economic disparities of mothers that manifest as delivering a very low birth weight (<1,500 g) infant

Root cause associated with each category:

Birth Weight Specific Mortality
Which population has the survival advantage?

Perinatal or medical care provided to mother and infant, prior to during or after birth

Percentage contribution to the difference in excess mortality rates

86%

14%
Low Birth Weight Distribution
Sacramento County

Target

Referent

Black LBW
- 3.7 - 5.0
- 5.1 - 10.0
- 10.1 - 20.0
- 20.1 - 30.0
- 30.1 - 33.3
- N/A

August 16, 2017
Sacramento County Epidemiology Unit
Phase II: Select Risk Factors for LBW Maternal Health/Prematurity Period

![Odds Ratio Chart]

- **Overweight/Obese**: Reference - 12.8, Target - 7.7
- **HTN (chronic)**: Reference - 7.7, Target - 5.8
- **HTN (gestational)**: Reference - 3.4, Target - 1.3
- **Plurality**: Reference - 1.8, Target - 4.4
- **Eclampsia**: Reference - 1.3, Target - 7.4

Odds Ratio

- **Reference**: Green
- **Target**: Purple

August 16, 2017
Sacramento County Epidemiology Unit
Phase II: Select Cause of Death Assessment
Infant Health Period

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<thead>
<tr>
<th></th>
<th>Rate per 1,000 fetal deaths and live births</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SUIDS</strong></td>
<td>0.62</td>
</tr>
<tr>
<td><strong>Congenital</strong></td>
<td>0.31</td>
</tr>
<tr>
<td><strong>Homicide</strong></td>
<td>0.06</td>
</tr>
<tr>
<td><strong>Lung disease</strong></td>
<td>0.04</td>
</tr>
<tr>
<td><strong>Accident</strong></td>
<td>0.02</td>
</tr>
</tbody>
</table>

**Reference**

- SUIDS: 0.62
- Congenital: 0.31
- Homicide: 0.06
- Lung disease: 0.04
- Accident: 0.02

**Target**

- SUIDS: 2.59
- Congenital: 0.52
- Homicide: 0.35
- Lung disease: 0.17
- Accident: 0.17
Risk Factors for SUIDS
Infant Health Period

<table>
<thead>
<tr>
<th>Risk Factors</th>
<th>Non-Black Mothers (Reference)</th>
<th>Black Mothers (Target)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>OR</td>
<td>P-value</td>
</tr>
<tr>
<td>Any smoking during pregnancy</td>
<td>9.98</td>
<td>&lt;.0001</td>
</tr>
<tr>
<td>Less than high school education</td>
<td>1.49</td>
<td>0.353</td>
</tr>
<tr>
<td>Inadequate prenatal care</td>
<td>0.83</td>
<td>0.712</td>
</tr>
<tr>
<td>Overweight or obese</td>
<td>2.13</td>
<td>0.070</td>
</tr>
<tr>
<td>Underweight</td>
<td>2.21</td>
<td>0.320</td>
</tr>
<tr>
<td>Maternal age (years)</td>
<td>0.96</td>
<td>0.264</td>
</tr>
<tr>
<td>Premature</td>
<td>1.22</td>
<td>0.750</td>
</tr>
<tr>
<td>Hypertension (chronic)</td>
<td>2.27</td>
<td>0.427</td>
</tr>
<tr>
<td>Hypertension (gestational)</td>
<td>0.94</td>
<td>0.948</td>
</tr>
<tr>
<td>Maternal infection during pregnancy</td>
<td>0.62</td>
<td>0.424</td>
</tr>
<tr>
<td>Medi-Cal as delivery payment</td>
<td>2.10</td>
<td>0.082</td>
</tr>
</tbody>
</table>
Key Findings

Racial disparities in feto-infant mortality:
• Results in an excess of about 14 deaths per year to black mothers
• Is most pronounced during the Maternal Health/Prematurity and Infant Periods

<table>
<thead>
<tr>
<th>Maternal Health/ Prematurity Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>• LBW distribution accounts for most of excess mortality</td>
</tr>
<tr>
<td>• Heart disease prevention may reduce LBW</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Infant Health Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>• SUIDS accounts for 72% of excess deaths</td>
</tr>
<tr>
<td>• Elimination of smoking during pregnancy may reduce SUIDS</td>
</tr>
</tbody>
</table>
Thank you!
Questions?

Epidemiology@SacCounty.net
Low Birth Weight Rates in RAACD neighborhoods

<table>
<thead>
<tr>
<th>Target Area</th>
<th>Black Low Birth Weight Rate</th>
<th>Other than Black Low Birth Weight Rate</th>
<th>Overall Low Birth Weight Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arden Arcade (95821, 95825, 95864)</td>
<td>11.5</td>
<td>5.8</td>
<td>6.7</td>
</tr>
<tr>
<td>Fruitridge (95820, 95824)</td>
<td>13.0</td>
<td>6.6</td>
<td>7.2</td>
</tr>
<tr>
<td>Del Paso Heights (95815, 95838)</td>
<td>9.4</td>
<td>7.9</td>
<td>8.1</td>
</tr>
<tr>
<td>North Highlands (95660, 95842, 95841)</td>
<td>10.7</td>
<td>5.3</td>
<td>5.9</td>
</tr>
<tr>
<td>Valley Hi (95823, 95828)</td>
<td>10.8</td>
<td>7.1</td>
<td>7.7</td>
</tr>
<tr>
<td>Meadowview (95822, 95832)</td>
<td>11.5</td>
<td>6.6</td>
<td>7.5</td>
</tr>
<tr>
<td>Sacramento County</td>
<td>10.5</td>
<td>6.4</td>
<td>6.8</td>
</tr>
</tbody>
</table>
South Sacramento Christian Center’s mission is to build a strong church, and empower our community through education, programs activities and events that promote unity and wholeness for spirit, soul and body. We believe that true ministry goes beyond the walls of the church and reaches to transform and rebuild its community.

**BCLC:**
To leverage grass roots organizations, agencies, businesses, city and county services, youth and adult community leaders and Valley Hi community residents to work collaboratively and relationally to reduce African American child deaths 10% to 20% by 2020.
MDT TEAM:

• Eva Corona-DHA
• Jacquelyn Duncan-CPS
• Jose Diaz-Mendoza-Probation
• Simone Paurley-SETA
<table>
<thead>
<tr>
<th>Name</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Freddie Dearborn</td>
<td>Peacekeeper / Youth Mentor</td>
</tr>
<tr>
<td>Dedrick Suggs</td>
<td>Peacekeeper / Crisis Intervention Specialist</td>
</tr>
<tr>
<td>Aaron West</td>
<td>Peacekeeper / Mentor - volunteer</td>
</tr>
<tr>
<td>Damien Jones</td>
<td>Peacekeeper / First Responder</td>
</tr>
</tbody>
</table>
Services Offered:

- “Don’t Shoot Our Future Down” Forums various dates
- Peacekeepers / Community Crisis Response Team
- Crisis Intervention Specialist
- Hip Hop Classes/Family Relationship Building Activity
- Indoor Basketball / Community Youth Safe Space
- Roller Skating/Monthly Family Skate Nights- held on the last Saturday of each month FREE for all families if they attend family class at 5pm
- Violence Prevention Workshops and Concerts
- Youth mentorship in partnership with Voice of the Youth
- Monthly Night Walks/ Vigils for recent victims of violent crimes
- “Ball Out” Mentorship Program-youth basketball camp for at risk youth (summer program)
- S.H.O.P/AVP (Safety, Health, Opportunities, Practice/ Alternative to Violence
- Healing Festivals in partnership with Survivor’s Speak
- Co-Hosted Community Fairs
- Community Concerts – Events Held monthly at the Simmons Community Center

- Parenting Classes
- Community Baby Shower (September 2017)
- Back to School – Backpack and school supply give away Sunday 8/20/17 10:30am
- Healing Through the Arts Concert Friday 9/8/17 7pm at the Simmons Community Center
- Peacemaker Training Workshop with completion Certificate 9/9 9am-5pm at the Simmons Community Center -25 Massie Court
- Family Matters Forum – Radio 97.5
- Pray for My Hood monthly BBQ
- ( Every 4th Saturdays in Oak Park)
- Peace Making Workshops with Elk Grove and Youth Participatory Action Research Team Kickoff (August 24th, 2017)
- Bi monthly Connected partners meeting
- Juvenile Justice Listening Sessions in partnership with
- SacACT
Highlights
Peacekeepers
Family Skate Night/
Family classes

ACES- AVP-Financial Literacy-BCLC Overview
#Dontshootourfuturedown
Connected Partners meeting
Event collaboration

Upcoming partner collaborations include- Back to School Night (backpack and supply give away)
Community Baby Shower for expectant mothers, Job Fair, Community Day
Community fieldtrip
Trigger Stage Play
Youth Engagement
Accomplishments

• Recruiting more engaged community adult leaders and the development of our youth leadership team

• MDT structure is now in the norming phase and is bridging the gap between county services, grassroots organizations and community. We have all experienced some phenomenal quick wins for many of our families’ due to our current structure, cutting down on previous response times.

• In partnership with the City of Sacramento gang task force we brought on two additional staff members to fill the role of peacekeepers / crisis intervention / first responders to our team and already they have made a huge impact and has increased our effectiveness in community engagement and crisis response. Through their efforts, we successfully conducted 6 safe passage days held on the on the last day of school at Valley High, Florin High, Monterey Trail, Sac High, Hiram Johnson and Luther Burbank High; working with the principals, staff, campus police at each school with coordinated efforts of community leaders that resulted in zero fights or acts of violence at each of our designated school sites. This effort lead to the principals at Valley High and Sac High schools asking us to bring the AVP (alternative to violence) training to their school sites.