



October 26-28, 2020

# Maternal & Infant Health in the Digital World:

*Patient-Centered Care During COVID and Beyond*

**VIRTUAL CONFERENCE**

[hmhbga.org/event/beyondcovid2020](https://hmhbga.org/event/beyondcovid2020)

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Institute for  
Healthcare  
Improvement

# Redesigning Care with Black Women: Collaborating with Clinical and Community Partners in Atlanta and New Orleans

*Janina Daniels, Center for Black Women's Wellness; Audrey Stewart, Birthmark  
Doula Collective; Shannon Welch, Institute for Healthcare Improvement*



October 27, 2020

# Disclosure

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The presenters have no relevant financial or nonfinancial relationships within the services described, reviewed, evaluated, or compared in this presentation.



# Session Objectives

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- Explore principles of humble and respectful codesign with health care systems, community stakeholders and Black persons who birth.
- Learn specific approaches to improve inequities in maternal outcomes from the work Atlanta and New Orleans community partners have conducted.
- Understand how the collaborative approach across stakeholder groups, centering the voices of Black persons who birth, contributed to success achieved in this work.



# Today's Presenters

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Janina Daniels, MHA,  
CWC<sub>1</sub>, Center for Black  
Women's Wellness



Audrey Stewart, Birthmark  
Doula Collective



Shannon Welch, MPH,  
Institute for Healthcare  
Improvement



# EVERY TWO MINUTES, A WOMAN DIES FROM COMPLICATIONS RELATED TO PREGNANCY AND CHILDBIRTH. TOGETHER, WE CAN CHANGE THIS.

Most of these deaths are preventable when women have access to modern contraception and quality maternal health care before, during, and after childbirth.

## WHAT WE'RE DOING **MERCK** FOR MOTHERS

Working together with our partners, we can help make pregnancy and childbirth a safe, healthy, and joyful experience for women.

**\$500M**  
investment

**7.1M+**  
women reached

**10**  
years

**50+**  
programs

**100+**  
partners

**30+**  
countries



EVERY TWO MINUTES, A WOMAN DIES FROM COMPLICATIONS RELATED TO PREGNANCY AND CHILDBIRTH. TOGETHER, WE CAN CHANGE THIS.

Black women are 3-4 times more likely to die during pregnancy and childbirth than White women<sup>(4)</sup>

3-4x

**\$500M**  
investment

**7.1M+**  
women reached

**10**  
years

**50+**  
programs

**100+**  
partners

**30+**  
countries



# The First “Law” of Improvement

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*“Every system is perfectly designed to get the results it gets”*

Paul Batalden, MD

We must change the system to expect different results.





Merck for Mothers has an ambitious 10-year goal to end preventable maternal deaths worldwide.

The Institute for Healthcare Improvement (IHI) has an aligned mission to improve health and health care worldwide and a deep commitment to improving maternal health and equity.



# Better Maternal Outcomes Initiative: Overview

*Shannon Welch*



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# Improve Equity, Dignity, & Safety in Maternal Health

**Support national efforts to implement reliable evidence-based care** for women and newborns around the time of birth, leading to a reduction in maternal mortality in the United States (US) in 2021 compared to 2016.

**Facilitate locally driven, co-designed, rapid improvements in 4 communities** targeting the interface of health care delivery, the experience of birthers, and community support systems. The goal of these projects is to test and scale up maternal care supports and to create a learning network to test and learn across participating communities aimed at improving equity, dignity, and safety while reducing racial inequities in maternal outcomes.



# IHI's Purpose in this Work

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- Amplify the voices of Black women to address structural racism and implicit bias to ensure equity, dignity and safety for all Black women during the prenatal, birth and postpartum periods.
- Create and/or strengthen meaningful collaborations among people with lived experience, community organizations and workers, and health care systems.
- Co-design and share evidence-based learnings grounded in lived experience.





Atlanta



New Orleans



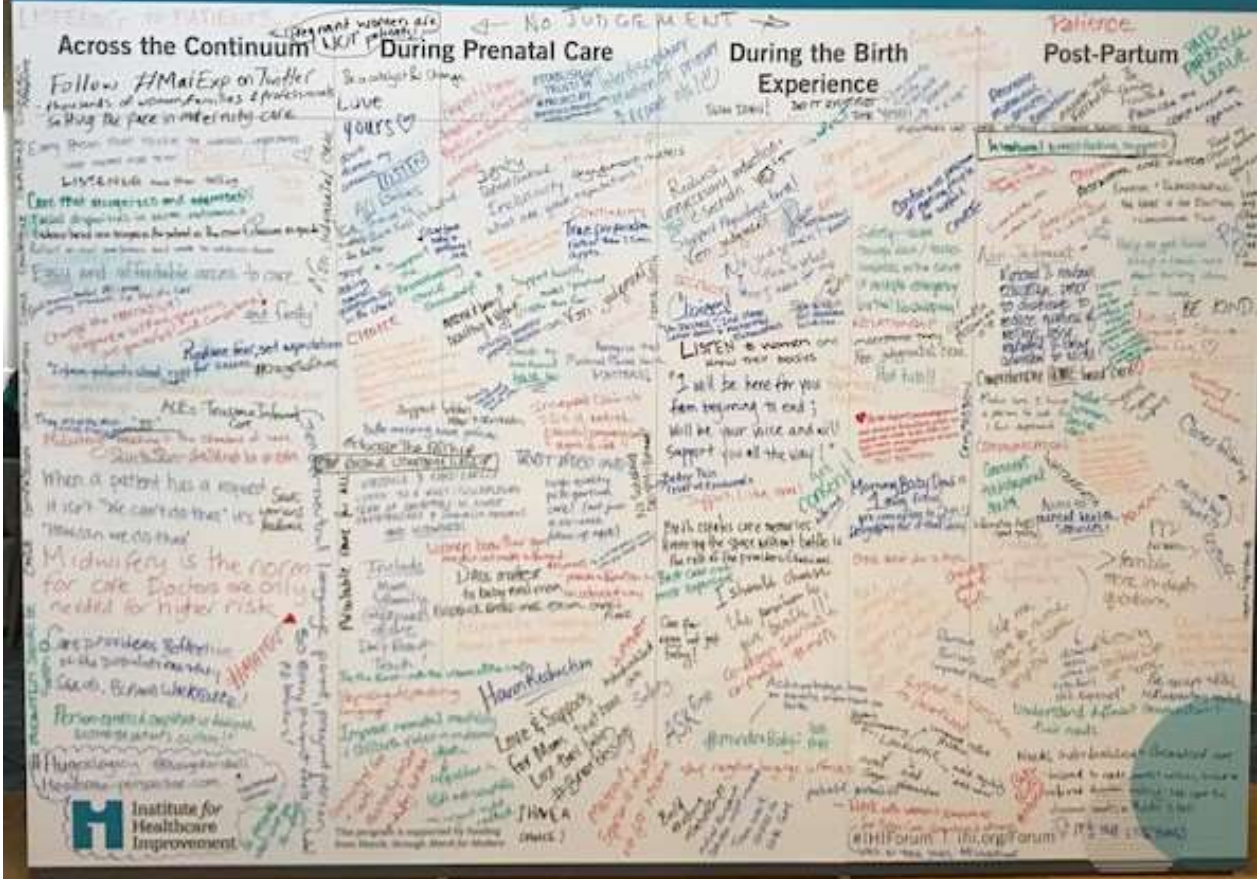
Washington DC



Detroit



# What Does Respectful Maternal Care Look Like?



What does respectful maternal care look like?



# Chime in!

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- What does respectful healthcare look like for you?
- How do you define respectful healthcare?



# Community Stories: Atlanta

*Janina Daniels, MHSA, CWC1, Center for Black Women's  
Wellness with IHI through Merck for Mothers*





# Landscape in Atlanta



P16



Georgia has the worst maternal mortality ratio of any state in the country.<sup>1</sup> Black women in Georgia are 3.3 times more likely to die from pregnancy-related complications than white women are.<sup>2</sup>

The average Infant Mortality Rate (IMR) in Fulton County between 2013 and 2015 was 7.6, with a **Black rate of 11.8** and a White rate of 4.1.

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# CBWW/Atlanta Healthy Start Initiative

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The Center for Black Women's Wellness (CBWW) is a community-based, nonprofit that has over a 30-year history of improving the health and well-being of underserved Black women and their families.

Atlanta Healthy Start, a maternal and child health initiative within CBWW, has had substantial success implementing culturally appropriate approaches to address infant mortality and disparities in perinatal health, such as increases in entry into prenatal care, increases in breastfeeding initiation rates, and strengthened coordination of care.



# Core Elements of AHSI

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Conduct ongoing workforce development, data collection, quality improvement, performance monitoring, and evaluation

Improve Women's Health

Improve coverage, access to care, and health promotion and prevention before, during, and after pregnancy

Assure Impact & Effectiveness

Improve Family Health & Wellness

Maximize community action and integration among health and social services

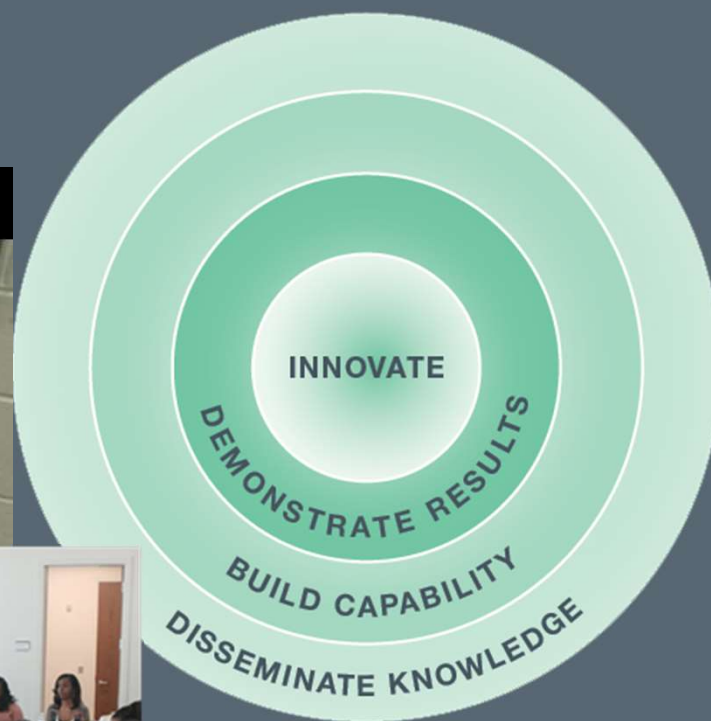
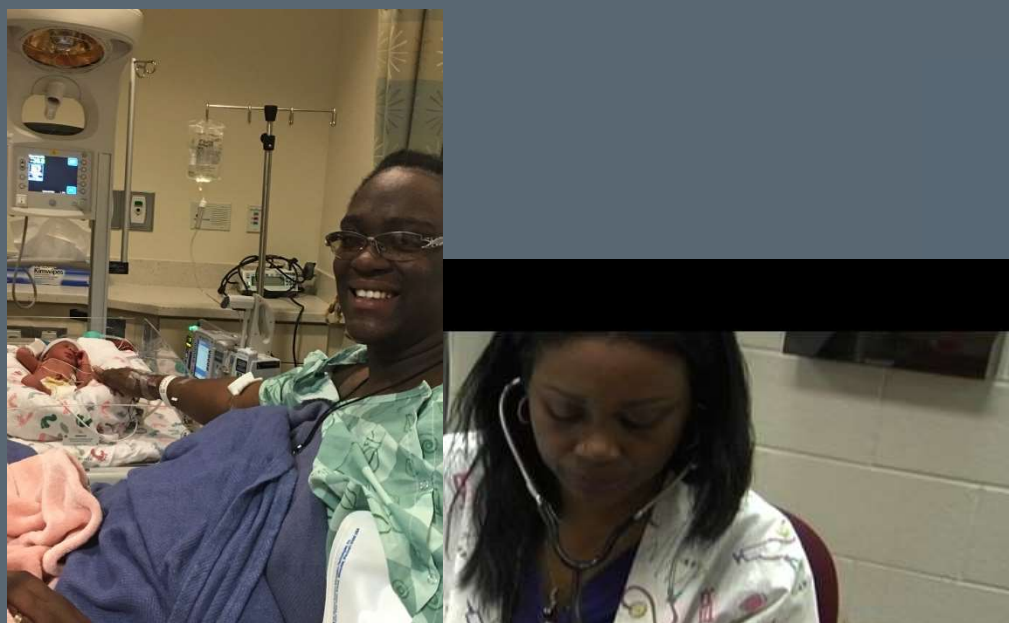
Promote Systems Change

System coordination/ integration, health promotion and prevention





# Making a Difference!!!



# Community Stories: New Orleans

*Audrey Stewart, CLC, Doula, Student Midwife  
Birthmark Doula Collective with IHI through Merck for  
Mothers*



# Landscape in New Orleans

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- Although 39% of women of reproductive age in Louisiana are Black, 68% of maternal deaths happened to Black women between 2011 and 2016.
- Among pregnancy related deaths in 2017, Black women were 5.6 times more likely to die of a pregnancy related cause than white women in Louisiana.
- This project added new dimensions to engaged, dynamic efforts to address maternal mortality in Louisiana
- Existing efforts involve hospitals statewide, the Louisiana Department of Health, the New Orleans Health Department, the Governor's office and numerous community and academic organizations.



# Birthmark Doula Collective

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- Birthmark was founded in 2011
- It is a full spectrum birth justice organization providing childbirth education, birth doula services, lactation care, and support groups for women of color
- Birthmark is also a leader in local and state advocacy



# + Honoring Black Birth & Motherhood





# What's different about this project?

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- Shifting Power

- This project engages Black women who have given birth in New Orleans hospitals as experts and teachers
- Co-design creates space for people of lived experience to work directly with providers and hospital staff as architects of real-time change

- Raising the Bar

- The process centers improving experiences of dignity as well as safety and explicitly centers Black women.

- Building Collaboration

- Three design teams (prenatal, birth and postpartum) focused on the full course of perinatal care and building links between hospital and community-based



# Challenges

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- This project happens at the intersections of deep and entrenched structural violence
- Many participants—including providers— have experienced significant trauma
- Resistance to letting go of “the way we’ve always done it”
- This work is happening in the context of already extremely taxed systems
- COVID-19 amplified stress on the system and limited access



# Wins

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- Strengthened ties between community organizations previously working alongside but not in coordination with each other
- Stronger coordination between providers, hospitals and doulas changed the way we relate to each other significantly
- During COVID-19, strengthened relationships and coordination proved life saving for some patients
- Building a stronger buy in around the “realness” and importance of racial equity work among all stakeholders
- Model new ways of working through the process



# Humble Co-Design

*How would you define humble co-design?*



# Community Stories: Atlanta

*Janina Daniels, MHSA, CWC1, Center for Black Women's  
Wellness with IHI through Merck for Mothers*



# Community Stories: New Orleans

*Audrey Stewart, CLC, Doula, Student Midwife  
Birthmark Doula Collective with IHI through Merck for  
Mothers*



Q&A




# Closing Themes

*Shannon Welch*







**The Approach:  
Listen, Learn, Lead  
Together**

# Critical Success Factors

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- Commitment to Equity
- Approaching the work with humility
- Commitment to co-design with context experts
- Awareness of the historical context/willingness to acknowledge and address institutional racism
- Ability to navigate various stakeholder relationships
- QI capability
- Project management support



# Thank you!

*For more information, please contact [maternalhealth@ihi.org](mailto:maternalhealth@ihi.org)*

