Promoting Women’s Reproductive Health in Detroit

Joneigh S. Khaldun, MD, MPH, FACEP
Director and Health Officer

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Why Is Women’s Reproductive Health a Priority?

- Detroit’s maternal mortality rate is 44 deaths per 100,000 live births compared to 23.3 in Michigan overall.
- Causes include obstetric hemorrhage, hypertension, embolism, amniotic fluid embolism, infection, and other complications from chronic conditions.
- Poverty, race, stress, lack of education, transportation, food insecurity are mitigating factors.
Teen Pregnancy, Infant Mortality, and Poverty

Detroit’s preterm birth rate is 13.9% compared to 10.2% for Michigan; risk factors include: maternal age, smoking, multiple births, birth spacing, obesity, and health insurance coverage.

Despite rising incomes, Detroit’s poverty rate remains high at 34.5% with 48% of children living in poverty.

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**Infant Mortality Rate**

*Per 1,000 Live Births*

- **14.1**
  - Teen Moms
- **6.8**
  - All Moms

**Graduation Rate**

*Graduated High School by Age 22*

- **50%**
  - Teen Moms
- **90%**
  - 1st Child After Adolescence

A teenager living in Detroit is 2.5 times as likely to get pregnant than the typical Michigan teenager.
SisterFriends Detroit: Community as an Asset

• Officially launched in August 2017, volunteer SisterFriends mentor pregnant women (or Little Sisters) throughout their pregnancy and through their baby’s first year

• Little Sisters receive social support and encouragement, transportation transportation services (Lyft®️), educational sessions, prenatal care, home visiting, and mental health/substance abuse services
SisterFriends Detroit: Success and Lessons Learned

• Over 400 women enrolled to date, with promising results in terms of preterm birth and low birth rate
  • 90% full term, compared to 86% for city overall

• Addressing social determinants of health needs and cross collaboration with external departments important
  • Transportation, workforce, housing, mental health
  • Robust case management and technology tools necessary

• Mentor recruitment and support is challenging
iDecide Detroit: Teen Pregnancy Prevention

• Two years engaging youth, clinicians, parents, faith-based

• Youth-developed and led campaign

• Targeted messaging through social media, schools

• Aligned 23 clinical providers, with new health department clinic to address access barriers
  • Lyft®
  • 833-9-DECIDE hotline
  • Clinician training
iDecide Detroit: Lessons Learned

• Early engagement with school system and youth
• Unmet need for services in community
  • Respectful
  • Culturally relatable
  • Accessible after hours and weekend
• Parents and community need support in having difficult conversations
• Seamless referrals helpful
  • Next day HIV care
  • Leave with appointments with network providers
• Data sharing across providers remains a challenge
What’s Next

• Strengthen alignment across sectors and organizations
• Scaling high quality efforts
• “Precision” public health—utilizing data to target initiatives