



# Promoting Women's Reproductive Health in Detroit

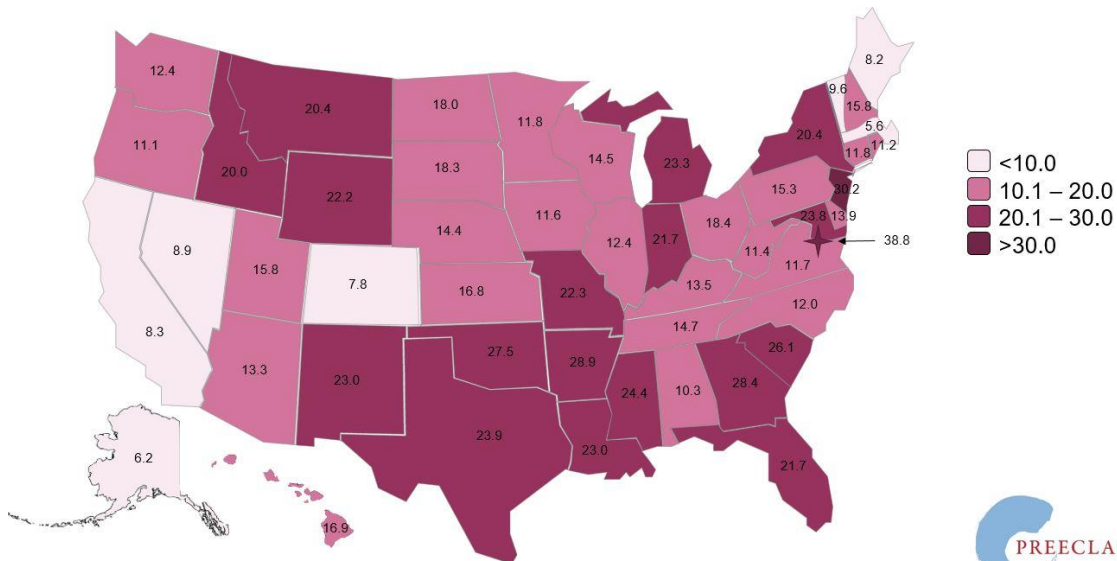
**Joneigh S. Khaldun, MD, MPH, FACEP**  
Director and Health Officer

Mayors Innovation Project - Winter 2019 Meeting  
January 25, 2019

# Why Is Women's Reproductive Health a Priority?



Maternal Mortality Ratio per 100,000 Live Births, 2005-2014



Source: Moaddab, et al. "Health Care Disparity and State-Specific Pregnancy-Related Mortality in the United States, 2005-2014", *Obstet Gynecol* 2016;128:869-75.



- 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

## Infant Mortality Rate

*Per 1,000 Live Births*



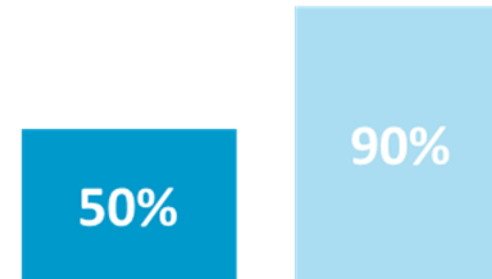
Teen Moms

All Moms

A teenager living in Detroit is **2.5 times** as likely to get pregnant than the typical Michigan teenager

## Graduation Rate

*Graduated High School by Age 22*



Teen Moms

1<sup>st</sup> Child After Adolescence

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.

**18.1%**

of Detroit teens do NOT use any form of contraception

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

# 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<sup>®</sup>), 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

