

Fetal and Infant Mortality Review

NFIMR Training
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National Fetal and Infant Mortality Review Resource Center

- Since 1990, NFIMR has been a resource center working with states and communities to develop fetal and infant mortality review programs

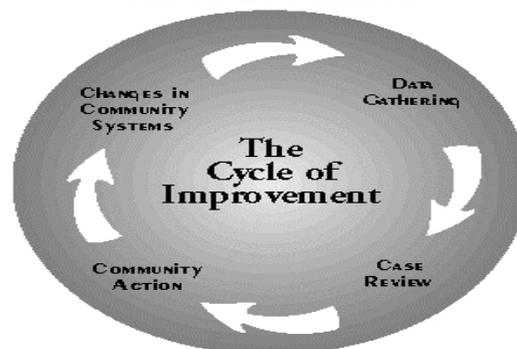
National Fetal and Infant Mortality Review Resource Center

- NFIMR is a cooperative agreement between the American College of Obstetricians and Gynecologists and HRSA's Maternal and Child Health Bureau
– Grant # U08MC000136

National Fetal and Infant Mortality Review Resource Center

For More Information
About the FIMR Process
Call (202) 863 2587
E mail us at NFIMR@acog.com
Visit us at <http://www.nfimir.org>
Sign Up for Our Listserv
<http://suse.acog.org/mailman/listinfo/nfimir>

THE FIMR PROCESS



“None of the studies made by the Bureau attempt to approach infant mortality as a medical question; they merely set down the co-existence of certain conditions of life with varying infant mortality rates. They are concerned with economic, social, civic and family conditions surrounding young babies.”

– Julia Lathrop paper read at APHA December 9, 1918

Johns Hopkins National Evaluation of FIMR

- A national evaluation of FIMR has systematically documented that
 - The presence of FIMR appears to significantly improve a community’s performance of public health functions as well as enhance the existing perinatal care system’s goals, components and communication mechanisms

Johns Hopkins National Evaluation of FIMR

- The focus of FIMR on systems of care and identifying gaps in care results in action being taken in a way that interpretation of vital statistics data alone does not necessarily promote

National Evaluation

- Local Health Departments in communities with FIMR compared with those without FIMR were more likely to report improved performance of the following core public health functions
 - Data collection and analysis
 - Client services and access
 - Quality improvement for systems of care

National Evaluation

- Local Health Departments in communities with FIMR compared with those without FIMR were more likely to report improved performance of the following core public health functions
 - Partnership and collaboration
 - Population advocacy and policy development, and enhancement of labor force

“The (FIMR) process that brings together people to learn from the story of a family that experienced a fetal or infant loss helps awaken both commitment and creativity. The stories illustrate community needs that are concrete, local and significant. The interaction among diverse community participants generates ideas for action that might lie beyond the imagination and power of an individual provider or agency.”

– Seth Foldy, MD
Commissioner of Health, Milwaukee WI

Disparities Persist

- In 2004, the ratio of black-to-white infant mortality rate was 2.4
 - The same as 2003
 - National Vital Statistics Reports Vol. 55, Number 9 August 21, 2007

Population-based data documents health disparities but does not necessarily show the specific path to meaningful community action!

What Are the Most Frequent Issues FIMR Programs Are Addressing?

- Access to care
- Bereavement
- Perinatal care
- Preterm labor/delivery

What Are the Most Frequent Issues FIMR Programs Are Addressing?

- Postpartum depression
- SIDS risk reduction
- Smoking cessation
- Substance abuse

Did You Know?

- 60% FIMR programs report being located in communities with 3 or more ethnic groups majority develop culturally relevant educational materials

Did You Know?

- FIMR programs report 55 racial/ethnic groups AND provide culturally specific approaches
 - African American
 - Haitian
 - Dominican
 - Jamaican
 - Native Hawaiian
 - Samoan
 - Tongan
 - Non-Hispanic White
 - Cambodian
 - Thai
 - Hmong

Did You Know?

- FIMR programs report 55 racial/ethnic groups AND provide culturally specific approaches
 - Asian Indian
 - Chinese
 - Filipino
 - Japanese
 - Korean
 - Thai
 - Puerto Rican
 - Cuban
 - Central American
 - South American
 - Mexican American
 - Crow

Did You Know?

- FIMR programs report 55 racial/ethnic groups AND provide culturally specific approaches
 - Confederated Salis-Kootenai
 - Assiniboine-Sioux
 - Chippewa-Cree
 - Bay Mills Indian Community
 - Keweenaw Bay Indian Community

FIMR Takes Action

- FIMR components help to identify multi-cultural needs & solutions
 - Diverse coalition/community partnerships
 - Listening to the voice of local families whose infant died
 - Interventions based on decisions of the whole community & local families

FIMR – Effective Approach to Address Infant Mortality Disparities Because

- Women tell us the services they did not receive but needed
- Culturally diverse member agencies part of the team to fix identified problem

**Mother's want to talk....
and tell the story of their
child's life and death.**

Oakland, CA Safe Sleep & More Video Clip

- Problem
 - Bereaved mothers report not understanding health messages

Oakland CA Safe Sleep & More Video Clip

- Solution
 - SIDS resource binder for providers
 - FIMR team develops/translates patient education materials from local and national resources in 8 languages
 - English, Spanish, Amharic, Chinese, Thai, Laotian, Croatian, Vietnamese

Hidden Hazards of Adult Beds for Babies



Virginia Department of Health, Cheryl Nunnally Bodamer



Preconceptional Care

- Problem
 - Need for services for at risk African American women before pregnancy
- Solution
 - Project Magnolia

Siouxland, IA Health Department

- Problem
 - American Indian mothers did not have crib for newborn
 - Tradition that pregnant woman should not make plans for the baby or buy a crib until after birth

Siouxland, IA Health Department

- Solution
 - Where will your baby sleep? program
 - Crib program & education of health workers

**Project Moses
Karen Smithson
and Carol Brady**



**Project Moses
Karen Smithson
and Carol Brady**



**Increased Preterm Deliveries
African American Women**

- **Problem**
 - 5 to 1 disparity, especially deaths due to preterm labor
- **Solution**
 - Raise awareness through church based messages



**Milwaukee, MN
SIDS Risk Reduction**

- **Problem**
 - African-American, Latino and Hmong residents of Milwaukee were less likely to place their infants on their back to sleep

**Milwaukee, MN
SIDS Risk Reduction**

- **Solution**
 - Health Department asked faith communities to help them reach families with SIDS risk reduction messages

Milwaukee, MN SIDS Risk Reduction

- **Solution**
 - Nineteen parish nurses serving 24 parishes coordinated a church-based "Back to Sleep" campaign

Milwaukee, MN SIDS Risk Reduction

- **Solution**
 - Nurses also integrated the SIDS risk reduction message into their ongoing teaching plans
 - The risk reduction education effort will continue beyond current campaign

Coordination of Newborn Care

- **Problem**
 - American Indian mothers did not have crib for newborn
 - Tradition that pregnant woman should not make plans for the baby or buy a crib until after birth

Coordination of Newborn Care

- **FIMR Solution**
 - Where will your baby sleep? program
 - Crib program & education of health workers

Northern VA Preterm Deliveries Spanish Speaking Women

- **Problem**
 - Bereaved mothers report NOT telling health care provider about preterm labor
 - Lack of knowledge & communication barriers

Northern VA Preterm Deliveries Spanish Speaking Women

- **Solution**
 - Comenzando Bien
 - Focus on preterm labor
 - Partnership with March of Dimes

Can FIMR Make a Difference?

- **YES, FIMR Can!**
 - Increase community awareness about SIDS
 - Ensure that SIDS risk reduction messages are delivered by trusted messengers
 - Develop culturally appropriate SIDS educational messages

Take Care of Yourself



In Conclusion

- **FIMR process**
 - Helps communities prepare and deliver culturally appropriate interventions to improve service system and resources for their multi-ethnic populations