

OUR COMMUNITY PARTNERS

RYAN WHITE CARE PROGRAM

HEALTHY START OF NORTH
CENTRAL FLORIDA

CENTRAL HEALTHY START

RURAL HEALTH PARTNERSHIP OF
NORTH CENTRAL FLORIDA



Thank you!

WellFlorida Council is proud to have the following people serve on our board of directors. We appreciate their commitment to our organization and communities. If you or someone you know is interested in participating on the WellFlorida board of directors, please contact your County Commissioners. There are current vacancies for Bradford, Citrus, Hernando, Lafayette, Marion and Sumter counties. These volunteer positions require a two-year commitment.

EXECUTIVE COMMITTEE:

PRESIDENT: Bryan "Tim" Marshall, D.D.S., *Hernando*

VICE PRESIDENT: Cecelia Young, *Union*

TREASURER: Jonathan Cherry, *Lake*

SECRETARY: Tim Bowen, *Alachua*

PAST PRESIDENT: DeWayne Yates, *Gilchrist*

AT LARGE: Rick Young, *Citrus*
Sharon Gay, *Hamilton*

BOARD MEMBERS:

Tim Alexander, *Dixie*

Deborah Brazill, *Lake*

Thomas Cappello, *Alachua*

Slande Celeste, *Levy*

Shannon Elswick, *Lake*

James Hanes, *Marion*

Linda Jones, *Columbia*

Patrick Lubitsky, *Alachua*

Nancy McCullers, Ph.D., *Suwannee*

Donald McNeal, D.D.S., *Putnam*

Black infant mortality in Putnam County



Putnam County had the highest infant mortality rate in the state for 2004-2006. Blacks represent approximately 17% of the total population, while experiencing nearly 50% of all infant deaths. For every 1,000 black babies born in Putnam County, 27 will die before they are a year old.

As a result of these startling statistics, Putnam County was one of eight counties selected to participate in a project to create local initiatives to reduce the rate of black infant mortality. The Putnam County Black Infant Health Initiative, Healthy Start of North Central Florida Coalition, WellFlorida Council and community

members worked together to determine the factors associated with racial disparities in infant mortality, create awareness of the problem and develop recommendations for improving health outcomes for black infants in Putnam County.

Why the high rate of infant mortality among blacks?

Research indicates that a larger percentage of black mothers *may* have one or more of these high risk factors: receive less than adequate prenatal care, are under the age of 20, have less than a high school education, are not married, are overweight or obese,

continued on next page

How the US measures up

Infant mortality rates by race:
US, 2002-2004 Average
Rate per 1,000 live births

	Rate
Black	13.5
Native American	8.6
White	5.7
Asian	4.8
Total	6.9

National Center for Health Statistics, period linked birth/infant death data. Retrieved August 29, 2008, from www.marchofdimes.com/peristats.

International Comparisons:
Infant mortality rates¹, 2004

Rank ²	Country	Rate
1	Singapore	2.0
2	Hong Kong	2.5
3	Japan	2.8
4	Sweden	3.1
5	Norway	3.2
6	Finland	3.3
7	Spain	3.5
8	Czech Republic	3.7
9	France	3.9
10	Portugal	4.0
11	Germany	4.1
11	Greece	4.1
11	Italy	4.1
11	Netherlands	4.1
15	Switzerland	4.2
16	Belgium	4.3
17	Denmark	4.4
18	Austria	4.5
18	Israel	4.5
20	Australia	4.7
21	Ireland	4.9
21	Scotland	4.9
23	England and Wales	5.0
24	Canada	5.3
25	Northern Ireland	5.5
26	New Zealand	5.7
27	Cuba	5.8
28	Hungary	6.6
29	Poland	6.8
29	Slovakia	6.8
29	United States	6.8
32	Puerto Rico	8.1
33	Chile	8.4
34	Costa Rica	9.0
35	Russian Federation	11.5
36	Bulgaria	11.7
37	Romania	16.8

¹Under 1 year of age; ²Rankings are from lowest to highest IMR. Countries with the same IMR receive the same rank. Some of the variation in infant mortality rates (IMRs) is due to differences among countries in distinguishing between fetal and infant deaths. Note: US data used in this table is final mortality data.
Source: National Center for Health Statistics. Available at <http://www.cdc.gov/nchs/hus.htm>

Black infant mortality in Putnam County, cont.



drink alcohol during pregnancy, have less time between pregnancies, and/or have twins and triplets. The leading causes of death for infants of all races in Putnam County are perinatal conditions, SIDS and congenital abnormalities.

Ten focus groups, with nearly 90 black community members, were conducted in April and June 2008 throughout Putnam County. In the focus groups, 70% were female, 50% were over the age of 35, and 70% reported having children. Participants expressed a general lack of awareness of infant mortality and the racial disparity that exists, and shared a level of skepticism about the data. Family and social networks are considered important in obtaining health and pregnancy information, and the teen pregnancy rate is a significant concern. Participants identified behaviors associated with having a healthy pregnancy and healthy baby, but noted significant gaps in education and promotion of positive behaviors. Reasons identified as impacting poor health outcomes included: limited financial resources, inequity in the quality of health services, limited positive black role models, limited male involvement, lack of social support, and impact of chronic stress on mothers.

In an effort to raise awareness about infant mortality within the black community, the Initiative, Healthy Start and WellFlorida implemented community engagement activities, including *Celebrating Healthy Babies—A Healthy Baby Begins with You*. This event was part of a national campaign to raise awareness about infant mortality with an emphasis on the African American community. The event provided information, education and resources to promote healthy babies and healthy families in Putnam County.

The group also increased awareness through local churches' "Issue of the Month." A representative from each of the 50 black churches in Putnam County delivered a five-minute presentation to congregations on issues impacting infant health in the County. Church members received an informational brochure that included a list of local resources.

Recommendations developed by the Initiative, Healthy Start and WellFlorida include:

- Develop and implement outreach activities targeting the black community utilizing the faith-based community, particularly in outlying areas, to increase knowledge and awareness of maternal and infant health issues.
- Identify, develop and/or modify interventions to address key issues including: reducing teen pregnancy, increasing social support, promoting positive role models and increasing male involvement.

For more information about the project, go to the Resources page of the WellFlorida website (www.wellflorida.org) and download *Fact Sheet: Putnam County Black Infant Health Initiative*. You may also contact Julie Ackerman at ackermanj@wellflorida.org or 352-313-6500 ext. 116.

Local Rural Health Partnership receives grant

The Rural Health Partnership of North Central Florida (RHP) recently received a three-year, \$540,000 grant from the Health Resources and Services Administration (HRSA). Grant funds will be used to improve and expand RHP's infrastructure, services and activities, as well as address emerging Medicaid reform issues.

RHP, a network of healthcare providers in nine rural counties of North Central Florida, previously survived on the slim budget of \$63,673 a year. In part, the HRSA grant funds will be used in the RHP service area to provide free and reduced-fee training opportunities for physicians and their staff, develop disease management services, enhance recruitment and retention programs, and investigate a regional electronic medical records system—all things that will strengthen the network's ability to work together.

"The ultimate goal is to create a provider service network to help the partnership overcome the challenges of Medicaid reform," said Kendra Siler-Marsiglio, new Program Director of RHP.

According to Jeff Feller, Chief Operating Officer of WellFlorida Council, the

proposed network is based on the legislative vision of what rural health networks can accomplish and the work done by another rural health network—the St. Johns River Rural Health Network (SJRRHN), which serves northeast Florida. Members of RHP wrote the grant, which will be managed by WellFlorida Council as staff to the partnership.

In the example of SJRRHN's pilot project, healthcare providers in the *continued on next page*



Calendar

September 2008

National Infant Mortality Awareness Month

2008 U.S. Conference on AIDS

Join fellow case managers, physicians, public health workers and advocates at the largest AIDS-related gathering in the United States. Attendees will have the opportunity to build national support networks, exchange the latest information and learn cutting-edge tools to address the challenges of HIV/AIDS.

September 18-21, Miami Beach

For more information, visit <http://nmac.org/index/2008-usca>

Diabetes Educational Forum

The Florida Alliance for Diabetes Prevention and Care presents the third annual forum on diabetes empowerment through community mobilization and education.

September 19, West Palm Beach

For more information, visit <http://www.tchealthcouncil.org>

October 2008

State Health Policy Conference

The National Academy's 21st annual conference is for state health policymakers who want to meet with policymakers from other states, learn about promising programs and gain new insights on how to tackle health care needs.

October 5-7, Tampa

For more information, visit <http://www.nashp.org>

Visit our website:

www.wellflorida.org

Working Together to Build Healthy Communities

Want to learn more about WellFlorida and/or our Community Partners?

Would your organization like to submit an article for publication in the WellFlorida newsletter?

Interested in becoming a board member at WellFlorida or with one of our Community Partners?

If you answered yes to any of those questions, please contact us. Fill out the form below and mail it to us OR email Katelyn Allen at kallen@wellflorida.org OR call 352-313-6500 ext. 100.

Area(s) of interest: _____

Please send me additional information on:

- North Central Florida Ryan White CARE Program
- Healthy Start of North Central Florida
- Central Healthy Start
- Rural Health Partnership of North Central Florida
- WellFlorida Council

Name _____

Address _____

Phone _____ Email _____



Local Rural Health Partnership receives grant, *cont.*

network are required to participate in Medicaid Reform, which includes enrollment in a Medicaid Managed Care Organization. The organization conducts the business functions and services that are more efficient if centralized. The network, SJRRHN, is responsible for provider and community relations. Primary care providers make decisions about patients and provide the authority, tools and incentives for their patients' care.

"This model, which will be expanded and improved upon, blends the best principles of managed care with the cooperative aspects of the RHP. It will reflect the spirit of the statewide reform initiative while preserving and strengthening the rural healthcare delivery system," said Feller.

Initially, the project will target the current nine-county RHP service area, but is proposed to grow by two neighboring rural counties. RHP currently serves rural Alachua, Bradford, Columbia, Dixie, Gilchrist, Hamilton, Levy, Suwannee and Union counties.

"A robust rural health network will strengthen rural healthcare providers and rural healthcare systems by encouraging integration of activities across clinical, financial, technological and administrative functions," said Feller.

There are nearly 58,000 uninsured and 49,000 Medicaid eligible residents in this area—more than 35% of the region's total population. By comparison, Florida's total combined uninsured and Medicaid population account for only 20.2% of the total population.

"Each day I strive to strengthen our rural healthcare delivery systems to better accommodate the healthcare needs of hard-working rural Floridians and their families," Siler-Marsiglio said.

Kendra Siler-Marsiglio, Ph.D., can be reached at 352-313-6500 ext. 109 or kendrasm@wellflorida.org.