Perinatal Equity Initiative





In 2018, recognizing an alarming statewide gap in Black infant mortality, the state Legislature passed the Budget Act of 2018 which included the establishment of the California Perinatal Equity Initiative (PEI) within the Department of Public Health. While declines in infant mortality have been achieved, the statewide mortality rate for Black infants continues to be two to four times higher than rates for other groups. The PEI aims to address the causes of persistent inequality and identify best practices to eliminate disparities in infant mortality.

The PEI complements programs and services offered through the Black Infant Health (BIH) Group Model. BIH is a group-based approach that provides services, information and social support to Black mothers to buffer the negative effects of racism and its consequences on women's environments and social experiences. PEI takes California's efforts to address racial disparities in infant mortality even further, promoting specific interventions designed to improve outcomes for Black mothers and their families.

Our Goal: To improve birth outcomes and reduce mortality for Black infants through interventions implemented at the county level that are evidence-based, evidence-informed or reflect promising practices.

We Serve: Pregnant and parenting Black women and their partners, through the first year of their child's life.

Service Delivery: Services are free and provided by community-based organizations in 11 counties.

Outcomes: PEI interventions will be evaluated utilizing the Results-Based Accountability (RBA)

framework. RBA is a methodological approach that allows local communities, in real time, to evaluate and respond to the impact of intervention efforts by making adjustments to the interventions as needed. Counties with similar interventions will be developing common (shared) performance measures that will be integrated into one evaluation instrument. Shared accountability means shared learning and shared commitment to reduce perinatal disparities in California.

Financing: PEI services are financed by State General Funds.





Where We Are Services are provided by community-based organizations in the

following counties:

- Alameda
- Contra Costa
- Fresno
- Los Angeles
- Riverside
- Sacramento
- San Bernardino
- San Diego
- San Francisco
- San Joaquin
- Santa Clara



Program Services

PEI supports eligible local health jurisdictions in the implementation of specific strategies that have shown evidence-based (or evidence-informed) promise in reducing racial health disparities in birth outcomes among Black women. These strategies include:

Group Prenatal Care Intervention that includes improvement in health provider preterm birth screening and ongoing risk-appropriate care for Black women that better predicts the risk for, and helps prevent, preterm births.

Pregnancy Intentionality, Preconception and Interconception Care Intervention is

designed to increase women's health by focusing on their ability to make informed decisions about if and when they become pregnant, and their health-affirming behaviors both prior to conception and between pregnancies.

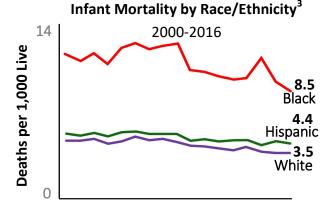
Fatherhood or Partnership Initiatives that promote the importance of having partners engaged in the process, bolstering mental, emotional and physical health both during pregnancy and post-delivery.

Home Visitation Programs that assess and empower women by connecting them to programs for prenatal care, monitoring, life planning, birth spacing, infant development, doula services and more.

Innovative Strategies not listed above that demonstrate evidence-based success in reducing adverse birth outcomes, like personalized case management, integration of mental health services in perinatal health care and other wraparound services.

Black Maternal Health & Birth Statistics

- Health disparities affecting Black women and babies appear to be less dependent on age, economic status or education.
- Poor birth outcomes persist even when Black women have a pregnancy at an optimal age, have high income or are well educated.
- Black women are four to six times more likely to die from pregnancy-related causes than Asian/Pacific Islander, Hispanic/Latina and White women.¹
- Black babies are twice as likely to be born with a low birth weight (less than 5 lbs., 8 oz.) than infants of other racial or ethnic groups.²



Graphic chart above is a representation of surveillance data. For actual data contact: MCAHDataHelp@cdph.ca.gov

2016

³ California Birth Cohort Files, 2000-2016; Prepared by the Epidemiology, Surveillance and Federal Reporting Branch, Maternal Child and Adolescent Health Division, Center for Family Health





2000

¹State of California, Dept. of Public Health, California Birth and Death Statistical Master Files, 2013

² State of California, Dept. of Public Health, California Birth Statistical Master File, 2017