

Health Advocacy in Pregnancy & Infancy (HAPI): Providing Perinatal Education and Advocacy to Homeless Pregnant Women Through a Patient-Centered Community-Engaged Partnership



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Objective

Implement a beneficial service-learning program consisting of educational modules on perinatal health and a student partnership program evaluated by participant debriefing surveys, mother retention, and health of infants

Background

- In 2017, Milwaukee's Infant Mortality Rate (IMR) was 12.6/1000 live births, compared to the national average IMR of 5.8/1000 live births^{1,2}
- The leading cause of Milwaukee's infant deaths was prematurity²
- Homelessness during pregnancy is correlated with a higher risk of premature births resulting in poorer birth outcomes³
- A previous needs assessment identified opportunities for intervention within education and advocacy, which guided the development of the HAPI Program

Results

Intervention 1: Interactive Modules

Table 1: Content analysis of 61 comment cards with 74 unique comments following 26 teaching sessions

Content Analysis of Post-Teaching Comment Cards

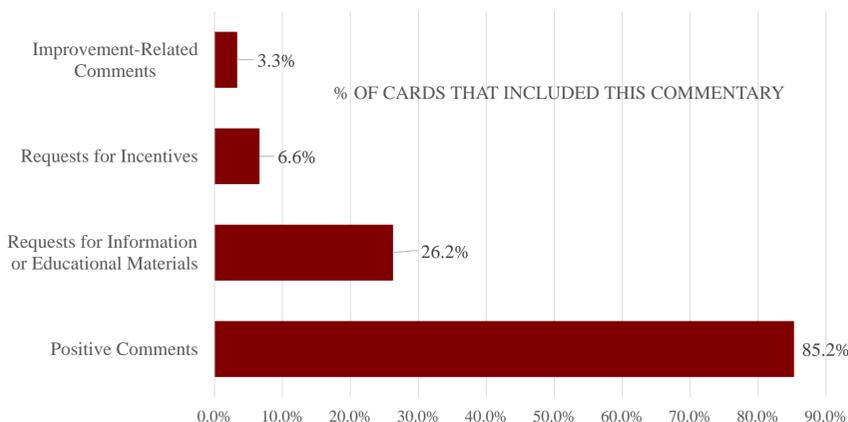


Table 2: Additional educational topics requested by session participants as noted by facilitators during the post-session verbal debriefings

Requested Education Topics	Number of Times Requested
Additional healthy recipes	3
Healthy sugar & carbohydrate intake Teething Developmental milestones Importance of protein in the diet Labor and delivery	2
Tantrums & ADHD management Baby feeding & transitioning to solid food Menopause Stress relief Toddlers Toilet training	1

Intervention 2: Student & Mother Partnership

- 6 women joined the student partnership program
- 2 women remain engaged and have completed appropriate health questionnaires
- 4 women lost to follow-up after first interview
- 3 healthy infants were delivered and remain healthy



Methods

Intervention 1: Interactive Modules

- Students taught 1-hour interactive modules on topics including nutrition, mental health, infant care, breastfeeding, and contraception at the Milwaukee Women's Center
- 2-4 women attended each session on average
- Module-specific incentives were provided
- Public and anonymous debriefing forms were completed following each session

Intervention 2: Student & Mother Partnership

- Mothers were paired with one student
- 4 mother/infant health questionnaires completed from pregnancy through age one
- The partnership program was evaluated by mother retention and health of infants

Conclusions & Future Improvements

In summary, the HAPI program has provided well-received education on perinatal health with actionable areas for improvement in the future as stated below:

Intervention 1: Interactive Modules

- Address need for child care to increase attendance at teaching sessions
- Incorporate participant's suggestions as appropriate
- Develop additional modules that align with previous needs assessment and ongoing requests

Intervention 2: Student & Mother Partnership

- Mother retention in the student partnership program continues to be a challenge with reliable means of communication being a significant barrier
- Provide prepaid phones to subsequent mothers who need a communication device
- Attempt bi-monthly phone or email follow-up until due date

Acknowledgements

This work was funded through the Medical College of Wisconsin's 2016 Community of Innovators Award, and with the Wisconsin Medical Society Foundation's 2017 Summer Fellowship.

References

- 1) Murphy SL, Xu JQ, Kochanek KD, Arias E. Mortality in the United States, 2017. NCHS Data Brief, no 328. Hyattsville, MD: National Center for Health Statistics. 2018.
- 2) Kowalik, Jeanette. City of Milwaukee 2015-2017 Infant Mortality Rate (IMR): Data Brief, Milwaukee, WI: City of Milwaukee Health Department. Oct 2018.
- 3) Cutts, D.B., Coleman, S., Black, M.M., Chilton, M.M., Cook, J.T., de Cuba, S. E., et al. (2015). Homelessness during pregnancy: A unique, time-dependent risk factor of birth outcomes *Maternal and Child Health Journal*, 19(6), 1276-12-83.