COMMUNITY BENEFIT

HOW LOCAL PARTNERSHIPS CAN IMPROVE MATERNAL AND INFANT HEALTH, ADDRESS STRUCTURAL BARRIERS

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he well-being of mothers, infants and children is important to a thriving community and can determine the health of future generations and impact future public health challenges. Experiences in the first three years of life build the foundation for all future learning, behavior and health. These experiences are shaped by the conditions of where people are born, live and learn.

The COVID-19 pandemic, racial reckoning and economic crisis have exacerbated existing challenges in public health. They contributed to poor health outcomes impacting vulnerable populations, including expectant parents and infants.² This is a pivotal time in our nation, with more women in the U.S. dying in childbirth than any other developed country.³

Though a national issue, the maternal and child health crisis is often felt most at the local level. Children are the future of our communities, and local leaders are their champions. There have been glimmers of hope as policymakers and advocates across the country raise awareness of this issue, championing policies and funding to improve and sustain maternal and infant health care, such as Medicaid expansion.⁴

To build on this progress and create a landscape of supportive, well-resourced communities in which maternal and child health is prioritized and protected, partnerships between key stakeholders — including local government, health systems and other critical community institutions — are necessary.

ADDRESSING ISSUES AT A LOCAL LEVEL

Municipal leaders work to build and sustain thriving cities where families want to live and raise their children. Local governments implement and oversee policies and programs that impact the day-to-day lives of their residents, including a myriad of activities that directly impact the health and well-being of mothers, children, families and their extended communities. While programs and policies at the federal and state levels can shape outcomes, children, families and their communities see the most impact at the local level.

At the city level, elected officials and staff are well-versed in the needs of the communities they serve and can enact tailored solutions rooted in their communities' unique needs. This local focus also brings a different degree of accountability to and awareness of residents' experiences, which better informs the development of effective policies and practices, addressing the root causes of community issues.

As cities seek to prioritize improving outcomes for young children and families, they cannot do this work in silos. Achieving true impact requires policymakers and city staff to work alongside multiple sectors of the community. As anchor institutions in communities and champions for community health, hospitals and health systems are natural collaborators in this work.

One example of this partnership in action is Family Connects Austin/Travis County, a partnership program of United Way Greater Austin and Austin Public Health. This free program aims to increase accessibility to nurses and community resources for families with newborn babies.⁵

Beginning in 2018 with a pilot program at St. David's South Austin Medical Center, the program

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connected families with a newborn delivered at St. David's with health services and provided insight and professional support for newborn child care to address areas such as family relationships, postpartum mental health and infant hygiene. Since then, the program has expanded to include Ascension Seton Medical Center Austin, and all Austin/Travis County residents who deliver at participating St. David's or Ascension Seton hospitals are eligible for a postpartum Family Connects nurse visit. By the end of 2023, more than 4,500 families had been served.

COLLABORATION TO IMPROVE COMMUNITY HEALTH

Many hospitals traditionally deploy community benefit funds to address specific patient medical and social needs. While this is significant work, it is important to pair it with upstream community-based strategies for long-term impact. CHA notes that health systems across the Catholic health care ministry are engaged in this work in their regions and are working with local partners to implement structural change to help create healthier communities.

Now is a great time for even more local hospitals to reach out to their city leaders and governmental staff and build lasting connections. Partnerships such as these are opportunities for hospitals and health systems to invest in community benefit funds in upstream, preventative and community-based strategies.

A reciprocal relationship between local health care institutions and municipal government establishes an ongoing cycle of resources and insights based on community experience and the social determinants of health. Collaboration with local government agencies can also extend hospital capacity to deliver population-based services. Municipal governments oversee programs and policies that have direct impacts on health and harbor critical connections to community organizations and resources that may not be as readily connected to health care institutions, making them a natural partner in this work.

Healthy Baton Rouge (HealthyBR) is an example of this collaboration and how local partnerships are critical in creating communities where young children, starting from birth, have the resources and opportunities to succeed and where families are supported. Part of the Mayor's Healthy City Initiative, HealthyBR brings together partners to promote healthier lives for all Baton Rouge residents. It also includes a resource hub,

featuring critical public health information, and connections to resources for community members on a variety of health issues.

Through a shared community health needs assessment, this collaborative identified maternal and infant health as a significant community health need, and, as a result, in 2021, the Baton Rouge Maternal and Infant Health Coalition was formed. Crossing jurisdictional lines, the coalition aims to go beyond city limits, connecting local, state and national partners to address maternal and infant health in Baton Rouge. Further, HealthyBR's site has a resource section for maternal and infant health, offering public health data on maternal and infant health in Baton Rouge, connections to local health care providers and support organizations, and information about local events related to maternal and infant health for community members.

PARTNERSHIPS AND SOCIAL PROGRAMS DRIVING CHANGE

Municipal leaders and local health systems can collectively scale opportunities and resources to create environments that enable residents to lead healthy lives. By moving care upstream, communities can disrupt the structural barriers impacting health and well-being.⁸ The following are strategies and examples to strengthen those partnerships and drive the trajectory of change:

- 1. Increase access to comprehensive health care services: Access to a medical home and/or services enables early detection and prevention of potential health problems for children and families. For example, DC Healthy Start, a federally funded program under the Health Resources and Services Administration, provides ongoing case management and home visitation to pregnant and postpartum patients and their children who reside in particular wards of the District of Columbia. The DC Department of Health also partners with community organizations to provide inhome parenting education to parents of children up to five years of age who reside in the district through its In-Home Parent Education Program. 10
- 2. Strengthen collaborative efforts: Collaboration between local government, community organizations and health care institutions provides an opportunity for a more informed perspective on patients' lived experiences. For example, Temple University Hospital in Philadelphia highlighted its participation in local care collaboratives,

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such as the Pennsylvania Perinatal Quality Collaborative¹¹ and Philadelphia's Maternal Mortality Review Committee¹² in its 2023-2024 community benefit report,¹³ citing these partnerships as a means of improving quality of care for birthing patients and newborns.

- 3. Support workforce development: The health care sector is a major employer, driver of economic activity and user of infrastructure. All of these can contribute to other goals, such as equal access to good jobs and economic development. Studies have shown that access to high-quality, affordable child care during critical developmental years can improve long-term health outcomes.14 For example, CHI St. Alexius Health Williston in Williston, North Dakota, opened a child care facility that supports both their employees and community members. Leveraging funds raised by the hospital foundation, unused space was renovated and is now being leased to a local child care provider, increasing the number of child care slots in the community by 60.
- **4. Promote diversity and inclusion:** There is increased recognition of the need to enhance services for culturally and linguistically diverse populations. ¹⁵ In efforts to ease challenges in pregnancy, birth and infancy, New York City launched a citywide doula initiative to reduce racial inequities in maternal health care. ¹⁶

PARTNERING FOR THRIVING COMMUNITIES

Experiences in the earliest years of life build the foundation for all future learning, behavior and health — not just for the individual, but for the entire community. Intentional local partnerships are essential to creating an ecosystem of care that improves maternal and infant health and prioritizes communities and populations that have historically been disinvested. These partnerships can provide the foundation to move the agenda forward and help communities thrive.

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