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Right! From the Start: Improving Maternal-Child Health in the Mississippi Delta

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Introduction

Right! From the Start (R!FTS) was created nearly ten years ago as a collaborative effort between Women and Children Health Initiatives, Inc. and the Community Foundation of Northwest Mississippi with support from the W.K. Kellogg Foundation (WKKF). The immediate goal of the initiative was to raise breastfeeding rates for mothers and babies in vulnerable families, especially those with preterm and low weight births. A long-term goal was improvement of maternal and child health outcomes in a region plagued by socioeconomic and racial disparities, the Mississippi Delta.

Sannie Snell, president of Women and Children Health Initiatives, attributes the success and longevity of this project to the support and involvement of the community. “The entire community was engaged in moving this initiative forward,” she explains. R!FTS has gone through three distinct phases of development.

2012-2015: Right! From the Start: Poor Birth Outcomes and Interventions in the Mississippi Delta

Right! From the Start was launched when Sannie observed that “a huge piece was missing” in efforts to improve conditions in the Mississippi Delta, because the problem of premature births was not being addressed. Her previous work in Memphis, TN had allowed her a special insider’s perspective into the neonatal intensive care unit (NICU), and she wanted to bring what she had learned to efforts in the Delta region.

Particularly important were her experiences as Vice President of marketing and communications at Regional One Health, an academic, safety net hospital in Memphis, and Vice President of Clinical and Quality Improvement at Alpha Maxx Healthcare, a population health management company that provided care coordination services for high-risk pregnant women and babies admitted to the NICU. Her unique position at the hospital allowed her to interact closely with the NICU’s neonatologists and frontline staff, as well as with the maternal-fetal medicine attending physicians and residents in the high-risk OB clinics to assist in creating services that focused on patients’ needs.

Sannie aspired to bring a similar care-coordination model to Mississippi, with the goal of lowering the rate of premature births and helping families with babies born preterm to overcome associated challenges for a healthy life. Her pitch was that it needed to be done right! from the start.

The W.K. Kellogg Foundation agreed to support her in testing her idea. WKKF connected her with Tom Pittman, CEO of the Community Foundation of Northwest Mississippi, a nonprofit with a special focus on education, health, and children serving Mississippi counties that include the Delta. The question was: how to take a collaborative model from Memphis and transition similar processes to Mississippi? It was determined that the first step should be to conduct a needs assessment. Sannie was introduced to Dr. John Green, then transferring from Delta State University, in Bolivar County, one of the counties served by CFNWMS, to the University of Mississippi (UM) to help with this initial evaluation project. Sannie remembers meeting him in August 2011 at a Delta Directions Consortium* meeting.

Right! From the Start's initial project, "Poor Birth Outcomes and Interventions in the Mississippi Delta," ran from 2012 to 2015. This three-year planning grant from W.K. Kellogg allowed for focus groups to be conducted that provided the background for the NICU Breastfeeding Initiative that was to come later. Through 2013 Dr. Green with the help of graduate students and Center for Population Studies staff conducted focus groups and world café discussion sessions in the community. They interviewed social workers, health care workers, and early childhood educators, who expressed concern for what happened to at-risk babies after they went home. They interviewed mothers from the Delta region about their experiences and perceptions surrounding breastfeeding. This work served as the foundation for the collaboration between Sannie, UM, and the University of Mississippi Medical Center (UMMC).

At the same time, Sannie had also been working on another project [with Tom Espy] involving church campaigns, and it dawned on Sannie that churches might be a good context to continue outreach for Right! From the Start. She gave WKKF the "church pitch" and the idea was well-received. And so the Healthy Babies Campaign was launched.

The Healthy Babies Campaign was conducted with churches and faith-based groups in the two Mississippi Delta counties of Humphreys and Sunflower. It aimed to raise awareness in the church and community of the benefits of breastfeeding for mothers and babies. The campaign included Healthy Baby Sundays, during which ministers preached a sermon in support of breastfeeding, and the Healthy Baby Ambassadors program. Elder mothers of the church were interviewed and recruited to serve as mentors to the younger mothers in the congregation. "For the first time," Sannie noted, "elder mothers who had been too poor to buy formula felt proud about having breastfed their children." They recalled noticing a difference between babies who had been formula-fed and breastfed. As part of the Campaign, church members were surveyed about their perceptions concerning birth outcomes and breastfeeding, and those data were used to inform programming.

During this era of R!FTS, the initiative also included an annual conference in the Delta town of Indianola to bring together a wide range of stakeholders, including social workers, nurses, lactation consultants, church members, and others to share

information and set the agenda for the coming year. Participants discussed research to inform their work, including a combination of breakthrough developments nationally to interpret data from Mississippi. They also discussed policy developments needed to sustain these kinds of programmatic efforts.

2016-2019: Right! From the Start NICU Breastfeeding Project

The next phase began with a Christmas luncheon that Sannie hosted in Greenwood, MS. For this occasion Dr. Alfio Rausa (a beloved public health advocate in the Mississippi Delta who passed away in 2018) brought together leadership from the state department of health districts in the Delta to brainstorm about how to best move the project forward. They discussed creating a system for breastfeeding at-risk babies once discharged from the NICU that would be the basis of the next grant. Sannie credits Dr. Rausa with introducing the project to the Mississippi State Department of Health, both at the district and state level. “He became our champion in encouraging a strong collaborative effort centered around breastfeeding between the project and health department leadership,” explains Sannie.

This next grant from WKKF would fund a pilot program to explore federally qualified community health center (CHC) and NICU collaboration in caring for premature babies. Sannie had the concept in mind, but needed help coordinating the care model she envisioned. She needed to find a neonatologist to work with her. Through the WKKF grantee network, Sannie was in contact with the founder of a milk donor bank who knew Dr. Mobolaji Famuyide at UMMC. The connection was made, and a new partnership was born.

The Right! From the Start NICU Breastfeeding Initiative took place from 2016 to 2019. Informed with more research, including interviews with mothers taking their babies to high-risk clinics, this initiative was a hospital and community-based effort to increase breastfeeding rates of low birth weight babies in the Mississippi Delta. Providers and researchers worked with women who had recently given birth whose preterm and low birthweight babies had ended up in the NICU. Psycho-social support was provided to mothers and families, and a care coordination model was developed that included UMMC staff working with the babies in the hospital, and the staff of Aaron E. Henry Community Health Services Center (Clarksdale, MS) and Delta Health Center (Mound Bayou and Greenville, MS) supporting mothers and babies after they left the hospital.

The Right! From the Start NICU Breastfeeding Initiative provided support for the mother and baby dyad to empower mothers and families to make the best choices for the most vulnerable babies. The multidisciplinary care coordination staff that worked with the mothers and the babies included both the hospital NICU staff and the community health center staff. The NICU staff included lactation nurses and social workers. The health center staff was composed of lactation specialists, social workers, and community health workers. All the staff at the health centers were cross-trained to intervene with the mother and the baby, and they worked collaboratively with the NICU and community resources, such as the Supplemental Nutrition Assistance Program for Women, Infants,

and Children (WIC), Head Start, and the Mississippi State Department of Health. The social workers took care of psycho-social and other related issues, but they also worked with the community health workers to help them with their roles. UM social work faculty member Dr. Tess Lefmann worked with the team to help them develop interview and social support skills for working with the mothers they would serve.

From her background and previous professional experiences, Sannie knew that one of the biggest concerns for the NICU staff was discharging the baby into an unknown environment. After working so hard to get the baby to the point where he/she was healthy enough to leave the hospital, they wondered, would the baby go home to a safe and supportive home? Toward that end, the NICU staff worked with mothers to conduct an environmental assessment to ensure that the baby was discharged to a safe environment. They checked to see that needed features were in place at home, such as electricity and refrigeration, as well as for features that could pose a threat, such as hanging electrical wires or guns in the home.

The community health worker was the first to interact post discharge with the mother and the baby; they were the first ones on the scene. They put the mother at ease. They conducted the environmental assessment to help the mother prepare for the baby's discharge. The CHW also introduced the other staff to the mother to make her feel at ease. The CHWs were cross trained to do lactation follow-up. For up to two years the CHWs continued to work with the mother and the baby to make sure that the baby was achieving the developmental milestones. The CHW was an integral part of the care coordination team. Overall, this initiative served 38 mothers and 43 babies.

As one of the transition activities for this era of RIFTS, another conference was held, this time in Jackson, MS to share results from the NICU project as well as to have partners share broader lessons learned and recommendations for the future.

2020 to 2023: Right! From the Start Community Intervention Project

The research team reached some conclusions as the four-year project progressed. One was that in order to have a healthier population and lower premature and low weight births, you have to intervene with the pregnant women long before they give birth. That is, you must address the impact of mothers' health, both physical and mental, to ensure the good outcomes. That includes consistent prenatal care and addressing nutrition and behavioral health issues, including smoking and drug use, socioeconomic issues, domestic violence, and depression. Domestic violence is one of the main causes of death and injury to mothers during pregnancy. Depression, both during pregnancy and postpartum, is also very prevalent.

Data from exit interviews in the previous NICU program revealed that all of the mothers participating in the initiative had some type of major stressor or traumatic event while they were pregnant. That included death of a spouse or close family member, separation from baby's father, or loss of home or income. Many of them had one or two

or more stressors. All of these culminate in toxic stress that impact the fetal development of the baby and can also be a factor in premature birth.

As Sannie explains, “That finding gave us the impetus to broaden our scope to address toxic stress during pregnancy and led us to our current project. Our goals for this project are to explore the creation of a comparable health center care coordination model for obstetrics and pediatric patients. We aim to develop and implement a parent intervention plan that may be used in rural and low resource areas by community health workers, that addresses causative issues of toxic stress during pregnancy and beyond, and that provides training and anticipatory guidance for pregnant women and new parents.”

Adding to the collaborative network for this new era for R!FTS are researchers from the Harvard T.H. Chan School of Public Health and Massachusetts General Hospital. This partnership stems from mutual involvement in the Delta Directions Consortium and participation in the Delta Regional Forum. They bring expertise to the initiative in the realms of adverse childhood experiences, toxic stress, and family support programs.

This new project, begun just as the COVID-19 pandemic took hold, was intended to be a home-based, family project. COVID has prevented the home visitation component just yet, and most of the research activities have been remote, but plans are to ramp back up when the pandemic is over. Additionally, work has been undertaken to develop critical data use agreements between the participating organizations to provide data-informed services, and the team has also collaborated on advanced training for community health workers and others interested in moderating the stressors that families face.

The Big Picture

Right! From the Start has evolved across three phases, moving step by step, project by project. Working to address gaps in coordination of services, build knowledge, and use research to inform practice, these efforts are adding the formation of a rural-focused and community-based model for connecting healthcare and support services. This will help families in the Delta region and beyond, demonstrating that innovation can arise from creative approaches to collective action for development.

* The [Delta Directions Consortium](#) is an interdisciplinary network of individuals, academic institutions, non-profit organizations, and foundations that work together to create positive social change in the Mississippi Delta Region by improving public health and promoting economic development. The Consortium is not an independent non-profit organization, but rather an alliance of partners committed to collaborative problem-solving.



NICU Breastfeeding Group meeting in Indianola, Mississippi, 2017. First row seated (left to right): University of Mississippi Medical Center team members Brent Ferguson, research assistant; Dr. Mobolaji Famuyide, neonatologist; and Jamie Ford, lactation nurse. Back row (left to right): Cynthia Louis, community health worker and lactation specialist, Delta Health Center; Jameshia Williams, chief social worker, and Shaneka Johnson, community health worker, Aaron E. Henry Community Health Center; Courtney Sellers, lactation specialist and social worker; Sannie Snell, president of Women and Children Health Initiative, Inc.; Caroline Canarios, research associate, and Dr. John Green, senior research associate, Center for Population Studies, University of Mississippi



A workshop at the 2016 Right! From the Start Initiative annual prematurity and breastfeeding conference at the Capps Center in Indianola, Mississippi. At center serving as scribe is University of Mississippi Society and Health Minor student Alex Fratesi. Standing to her left is Sannie Snell, president of Women and Children Health Initiatives, Inc.



Reel Talk Training, 2015: The church campaign included outreach to youth groups. Young people developed and filmed skits on the importance of keeping babies safe and healthy, breastfeeding, and supporting pregnant women and young mothers in the community.