

African American Infant Mortality in Colorado: Creating Solutions Together Summit, June 13, 2015
Life Course Perspective on Infant Mortality

What do the experts say are the “root causes” of the difference (the disparity) in the level of infant death for different groups? What has the Colorado/Denver/Aurora group discovered in talking about this issue? Both experts and our local group believe that differential exposures throughout life, including in the sensitive periods of life like early childhood, adolescence and during pregnancy, lead to different developmental trajectories, or paths to health or illness, across generations and throughout the life span. One expert, Dr. Michael Lu, and his colleagues published a paper in which they set out three goals -- and the steps to achieve them -- they believe will improve the infant mortality rate for African Americans. (See blue text in the far left column).

The three “root causes” the Community Action Network (CAN) derived are in the center column (see both sides of the paper) beside the goals and steps that fit with them. You will choose one of these three CAN “root causes” to discuss during the lunchtime/afternoon breakout sessions. The discussion of these “root causes” will form the basis of our work going forward.

Goal (Lu, M. et al.)*	CAN “Root Cause”
<p><u>Strengthen AA Families and Communities</u> Steps:</p> <ul style="list-style-type: none"> • More father involvement • Better coordination of family services • Improve social connections during pregnancy (and other “reproductive social capital” components) • Invest in communities and urban renewal 	<p>Social Isolation: belonging, support and social capital</p> <p><i>We define the “root cause” we call “Social Isolation” as an inadequate sense of belonging and support.</i></p> <p>Why this topic is important: The social context of a person and a family is <i>fundamental</i> to health. We can do more to increase a sense of belonging, improve mental and emotional health, and leverage assets and “social capital” to promote better health.</p>

*Source: Lu, M. et al. 2010. Closing the Black-White Gap in Birth Outcomes: A Life-Course Approach. *Ethnicity & Disease*, Volume 20, Winter 2010

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<p><u>Improve Healthcare for AA Women</u> Steps:</p> <ul style="list-style-type: none"> • Between and during pregnancies • BEFORE the first or any pregnancy (“pre-conception care”) • Better quality/culturally responsive prenatal care • Better and more responsive care throughout life 	<p>Healthcare: awareness, access, quality and utilization</p> <p><i>We define the “root cause” we call “Health Care” as better awareness, responsiveness, quality and engagement for health care professionals and their patients throughout the life course.</i></p> <p>Why this topic is important: Access to healthcare is necessary, but not sufficient. Access is not the same as equity. It’s important to distinguish equity and equality/access. <i>Equality</i> – meaning the same – and <i>equity</i> – meaning each having what is needed – are not the same.</p>
<p><u>Address Social and Economic Inequities</u> Steps:</p> <ul style="list-style-type: none"> • Close the education gap • Reduce poverty • Support working mothers/families • Undo racism 	<p>Racism/Unjust Systems</p> <p><i>We define the “root cause” we call “Racism/Unjust Systems” as any attitude, action or institutional structure that subordinates a person or group because of their color.</i></p> <p>Why this topic is important: Racism is not just a matter of attitudes; actions and institutional structures can also engender racism. When examining racism within unjust systems, there is a concise connection to power and privilege dynamics, which have to exist in order to exert force on or over something or someone.</p>

*Source: Lu, M. et al. 2010. Closing the Black-White Gap in Birth Outcomes: A Life-Course Approach. *Ethnicity & Disease*, Volume 20, Winter 2010