



# Black Infant Health Program

# BIH



PROFILE

**E**xperts believe that social, economic and racial stresses play an important role in poor birth outcomes—babies born too early and too small—for African-American women. Within a culturally affirming environment and honoring the unique history of African-American women, Black Infant Health (BIH) aims to help women have healthy babies. Participants learn proven strategies to reduce stress and develop life skills. This is accomplished through a group-based approach with complimentary

case management. The group experience builds social support, which helps buffer the negative effects of stress and empowers participants to make positive choices in their life. Weekly group sessions help women access their own strengths and set health-promoting goals for themselves and their babies. Ultimately, this approach will impact not only themselves, but future generations of African-American women, infants and families.

**OUR GOAL:** To improve African-American infant and maternal health, as well as decrease Black-White health inequities and social inequities for women and infants.

**WHO WE SERVE:** African-American women who are 18 years or older and up to 26 weeks pregnant at the time of enrollment.

**SERVICE DELIVERY:** Services are provided by Family Health Advocates, Group Facilitators, Public Health Nurses and Social Workers.

**OUTCOMES:** Current science supports an empowerment-focused, group-based intervention as a promising strategy for improving African-American women's birth outcomes. BIH participants report:

- Stronger positive connections to their heritage and the African-American women in their community
- Increased empowerment to make behavior changes that lead to living a healthier life
- Better understanding of effective stress-reduction strategies

**FINANCING:** Federal Title V MCH Block Grant Funds, Federal Title XIX (Medicaid) Funds and State General Funds.

## WHERE WE ARE

Services are provided in communities where over 90% of African-American births occur:

### Counties:

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

### Cities:

- ◆ Berkeley
- ◆ Long Beach
- ◆ Pasadena

## RESOURCES

Black Infant Health Program  
[cdph.ca.gov/blackinfanthealth](http://cdph.ca.gov/blackinfanthealth)

CDC-Social Determinants of Health  
[cdc.gov/socialdeterminants/](http://cdc.gov/socialdeterminants/)

Every Woman California  
[everywomancalifornia.org/](http://everywomancalifornia.org/)

March of Dimes  
[marchofdimes.com](http://marchofdimes.com)

Black Women's Health Imperative  
[blackwomenshealth.org/](http://blackwomenshealth.org/)

National Council of Negro Women  
[www.ncnw.org/](http://www.ncnw.org/)

## PROGRAM SERVICES

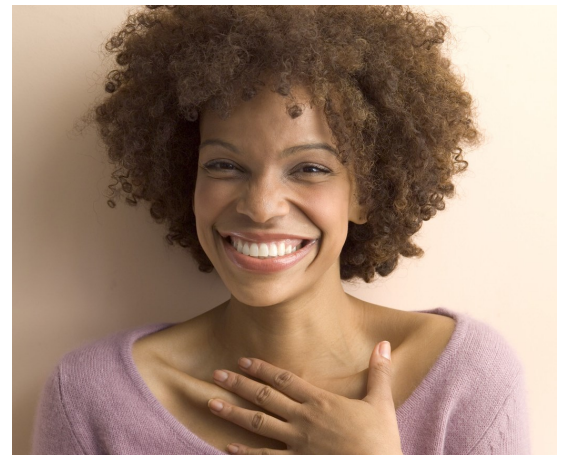
*Culturally Appropriate Services that Respect the Participant's Values and Beliefs*

The program includes empowerment-focused group support services and case management to improve the health and social conditions for African-American women and their families. Activities draw from promising practices and are based on the findings of a 2010 comprehensive assessment of the BIH model.

**Group Sessions:** BIH provides 10 prenatal and 10 postpartum sessions designed to empower and support participants. Group sessions are offered in a culturally sensitive setting that respects participant values and beliefs. Attendees interact with other mothers and women who are pregnant. The sessions offer engaging activities from a women's health perspective that explore pregnancy and parenting.

### Session Topics:

- ◆ Cultural Heritage as a Source of Pride
- ◆ Healthy Pregnancy, Labor & Delivery
- ◆ Nurturing Ourselves & Our Babies
- ◆ Prenatal, Postnatal & Newborn Care
- ◆ Stress Management
- ◆ Healthy Relationships
- ◆ Celebrating Our Families

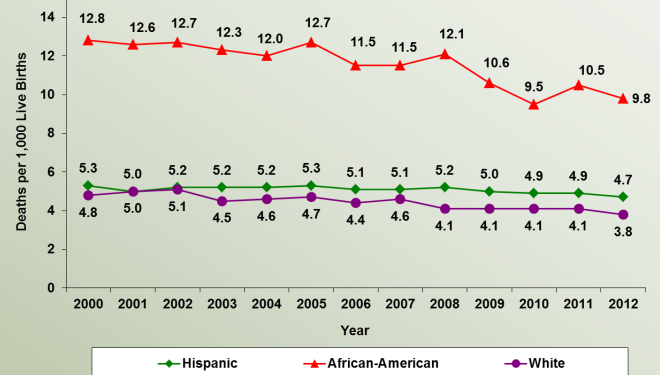


**Complementary Case Management:** BIH acts on the assumption that participants have the strength and resilience to improve their health for themselves and their families. Through case management, participants receive guidance and referrals on a range of topics, including health insurance application assistance and family planning counseling. Women become empowered to make positive choices in their life.

## AFRICAN-AMERICAN MATERNAL HEALTH & BIRTH STATISTICS

- ◆ Health disparities affecting African-American women and babies appear to be less dependent on age, economic status or education than for women of other racial or ethnic groups.
- ◆ Poor birth outcomes persist even when African-American women have a pregnancy at an optimal age, have high income or are well educated.
- ◆ African-American mothers are nearly four times more likely to die from pregnancy-related causes than White mothers.
- ◆ African-American 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.

### Infant Mortality By Race/Ethnicity



Sources: California Birth and Death Statistical Master Files, 2000-2012. Prepared by the Epidemiology, Assessment and Program Development Branch, MCAH, Center for Family Health

## WHO TO CONTACT IN YOUR AREA:

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