



Ohio Legislative Children's Caucus

*Learning, connecting, and problem-solving
together. Our children are counting on us.*

***Addressing Racial Inequities & Social Determinants of Health to
Promote Infant and Maternal Wellbeing***

March 1, 2021

Welcome!

*Opening comments from our caucus co-chair,
Senator Stephanie Kunze*



Jessica M. Roach & Dorian L. Wingard,

*Chief Executive Officers & Partners,
Restoring Our Own Through Transformation
(ROOTT)*





RESTORING OUR OWN THROUGH TRANSFORMATION

The Role of BCBO's & The Impact
of COVID-19

JESSICA M. ROACH, MPH
Chief Executive Officer & Partner

DORIAN L. WINGARD, MPA
Chief Operations Officer & Partner

ROOTT ORGANIZATIONAL OVERVIEW

Restoring Our Own Through Transformation (ROOTT) is a collective of concerned Black families, community members, advocates & interdisciplinary professionals dedicated to decreasing Black maternal & infant mortality in Ohio.

ROOTT's mission is to comprehensively restore our collective well-being through collaboration, resource allocation, research & re-empowerment, in order to meet the needs of Black parents & families.



ROOTT IMPACT STATEMENT

ROOTT provides direct services, public policy advocacy & education, in alliance with local & national stakeholders.

ROOTT goes beyond surface level risk factors regarding marginalized Black mothers, fathers, infants, & communities to address root causes of these of health inequities.

ROOTT addresses Structural/Institutional Determinants of Health including by targeting the racism that creates & sustains the Social Determinants of Health.

ROOTT collaboratively builds quality relationships with families, caregivers, professionals & paraprofessionals aligned with our mission.



SENIOR LEADERSHIP TEAM

Jessica M. Roach, MPH
CEO & Partner

Dorian L. Wingard, MPA
COO & Partner

DANIELLE H. JACKSON, BA
Intake Coordinator/PSD

DESTINY BENSON
Clinical Coordinator/PSD

LAUREL GOURRIER, M.ED
HV Coordinator/PSD



SNAPSHOT OF COLLABORATIVE PARTNERS



SisterLove, Inc.



SNAPSHOT OF COLLABORATIVE PARTNERS

Ohio | Department of Job and Family Services

Ohio
Department of Medicaid

Mi
MARCH OF DIMES


BRUSH FOUNDATION


BMMA
BLACK MAMAS MATTER ALLIANCE


GROUNDSWELL
FUND

Ohio | Department of Health

Safer Childbirth Cities 
MERCK

OHIO GOVERNOR MIKE DEWINE'S OFFICE OF
 **FAITH-BASED AND COMMUNITY INITIATIVES**

the
WOMEN'S FUND
OF CENTRAL OHIO



SNAPSHOT OF COLLABORATIVE PARTNERS

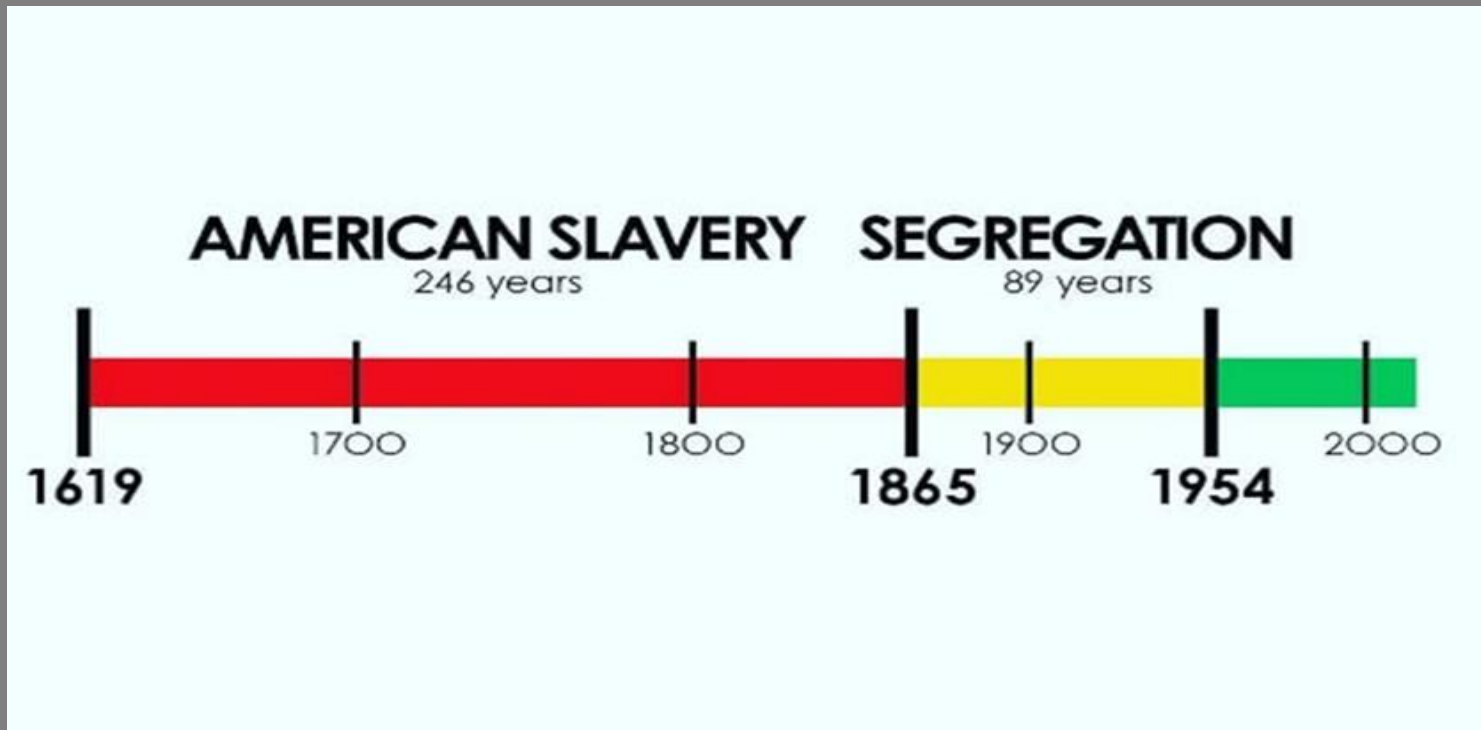


OHIO VOICE



Without addressing, **disrupting**, and **dismantling** the structural and institutional determinants, we **will not** be able to address social determinants.





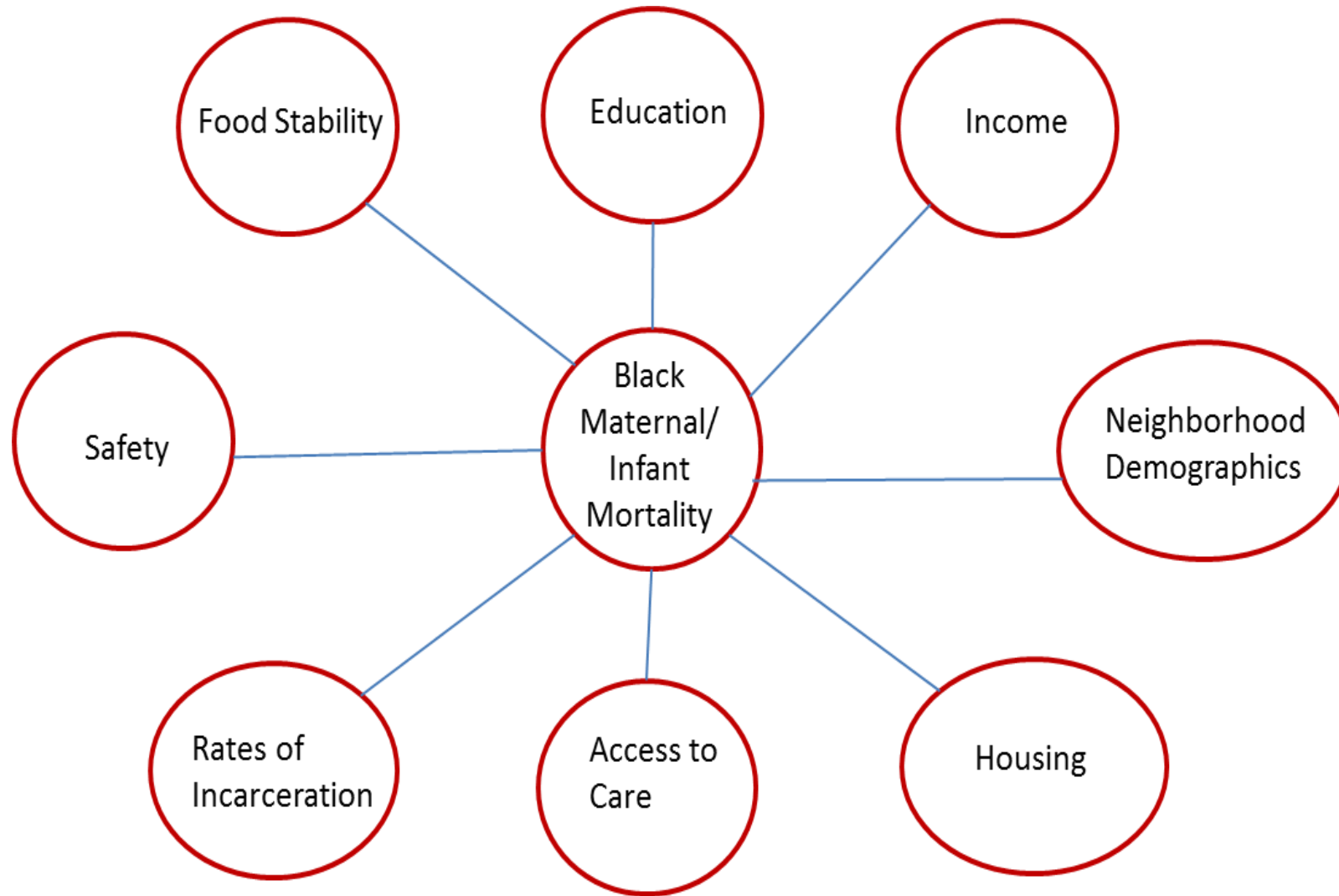
Disease is a social and political category imposed on people within an enormously repressive social and economic capitalist system, one that forces disease and death on the world's people"

**- Vicente Navarro, MD. Faculty Director, Johns Hopkins
Bloomberg School of Public Health**



WEB OF CAUSATION

SOCIAL DETERMINANTS



Theoretical framework courtesy of J.Roach, 2016. retrieved from www.roott.org



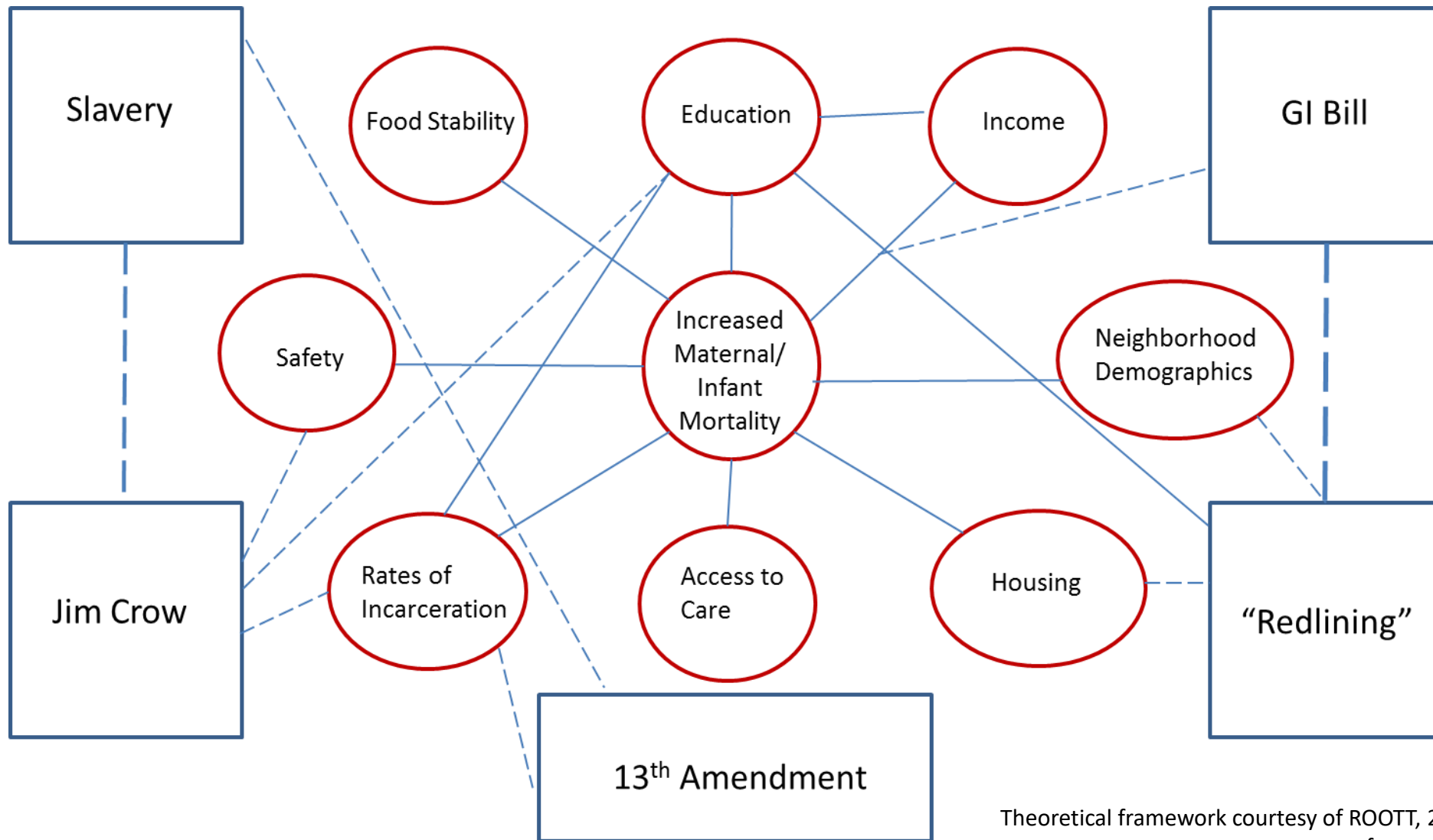
SHEPPARD- TOWNER ACT-1921

- Created Federal Aid for Maternal Child Health.
- Promulgated rules & regulations for training & licensure.
- These schools were largely inaccessible to Black women due to cost or segregation.
- Traditional immigrant & Black Midwives were illegal.



WEB OF CAUSATION

STRUCTURAL and SOCIAL DETERMINANTS: IMPACT ON HEALTH



Theoretical framework courtesy of ROOTT, 2016. retrieved from www.roottrj.org



ROOTT: A COMMUNITY BASED ORGANIZATION

Full Spectrum Perinatal Support Doulas
(Training & Certification)

Healthcare Provider Training & Continuing Education

CBO Consultation

SMEs & Policy Advocacy (Federal/State/Local)

Public Health Research (Independent & Institutional)

Social Injustice, Health Equity & Anti-Black Racism Activism



ROOTT FS-PERINATAL SUPPORT DOULAS



- Full Spectrum Perinatal Support
- Breastfeeding Education & Lactation Support (CLC)
- Health Information & Equity Advocate
- Family-centered Informed Decision Support
- Home Visiting Program Provider



“At some point, we must acknowledge and address how the foundation of Obstetrics and Gynecology as we know it in the U.S., was built from the stolen knowledge and traditions of Black and Indigenous Women...and used against us through means of rape, sexual assault, pedophilia, eugenics, and genocide. Reproductive Justice is the definition by which we say, WE are taking this back.”

Jessica M. Roach, MPH

”Race neutral solutions are impotent in the address of intentional, race-specific racism. Consequently, true health equity will certainly change the lives of the oppressed and the oppressor, in ways that may lead to the deconstruction of American inhumanity.”

DL Wingard, MPA



Abbreviated Highlights & Accomplishments

2017

Established as a NP w/
501 (c)3 designation

ROOTT Advisory Council
formed

Became kindred partner
of BMMA

Inaugural Core PSD
training class

2018

ROOTT's first family supported
birth

ROOTT's first national publication

ROOTT established central office

ROOTT's first major grant

ROOTT's first external training of
CHWs

2019

ROOTT initiated its HV Program via
ODH contract

ROOTT's appointment to several
national boards & taskforces

ROOTT expanded national training
activity (UCSF, Kaiser Permanente,
etc.)

ROOTT increased family client
base exponentially

ROOTT awarded funding via ODM,
GOFBI

ROOTT awarded MERCK Safer
Childbirth Cities grant



ROOTT: COVID - 19 Protocol & Impact

PROTOCOL

- All client family engagements are virtual.
- All staff equipped pandemic training & PPE.
- SLT case reviews occur 3x/weekly.
- Assisted home-birth support is being provided.
- Client families are being provided w/ basic resources & home monitoring equipment.
- Virtual labor & delivery support is being provided.

IMPACT (ADVERSE)

- Increased requests for home-birth (assisted/unassisted).
- Increases in erroneous health information.
- Increases in premature scheduled inductions
- Increases in forced/coerced surgical births.
- Decreases in positive client family/PCP-Hospital experiences.
- Inconsistent policy promulgation & application.
- Adverse birth outcomes.



This is how
we ROOTT!!

www.roottj.org



ROOTT Origin Story
NPR Story Corp, 8-2019



Christin Farmer,
CEO & Founder,
Birthing Beautiful Communities



Reem Aly,
Vice President,
Health Policy Institute of Ohio (HPIO)





Infant mortality in Ohio

Taking action

February 18, 2021

Ohio's rank on infant mortality



Note: 2018 data

Source: Centers for Disease Control and Prevention, Wide-ranging Online Data for Epidemiologic Research (WONDER)



Health Policy Fact Sheet

Taking action: Eliminating racial disparities in infant mortality

Why is action needed?

For many years, Ohio's infant mortality rate has been higher than most other states. Ohio's policymakers and health leaders have acted on this issue through multiple advisory committees, collaborative efforts, investments, legislation and other policy changes. For example, the Ohio General Assembly passed Senate Bill 332 in 2017, which implemented recommendations from the [Ohio Commission on Infant Mortality's 2016 report](#).

These efforts contributed to a 10% decline in the overall infant mortality rate from 2009 to 2019.¹ However, racial disparities in Ohio's infant mortality rate have increased. In 2019, the Black infant mortality rate was nearly three times higher than the white rate.²

In December 2020, Governor DeWine announced the creation of a new task force focused on eliminating racial disparities in infant mortality by 2030. The task force will host listening sessions in 11 counties, providing an opportunity for members to learn about promising programs, evaluation results and barriers to improving maternal and infant health for Black families.

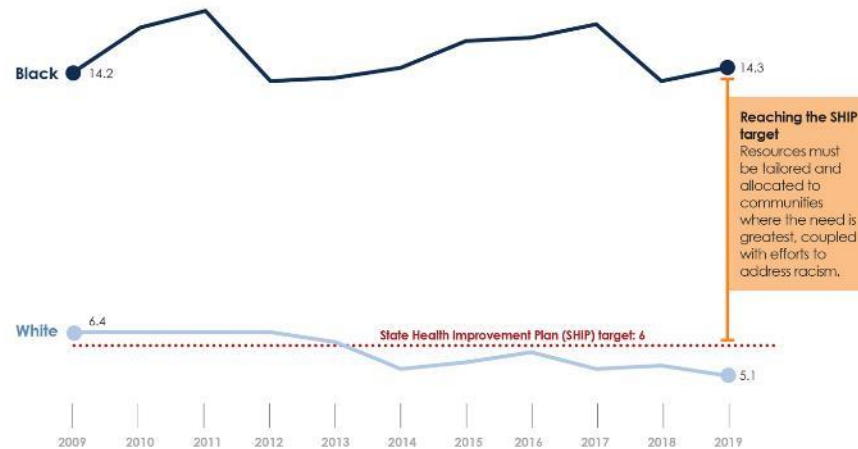
3 Action steps to eliminate Ohio's racial disparities in infant mortality

In order to close the racial gap in infant mortality, future efforts must:

1. Dismantle racism and address its consequences
2. Improve health across the life course, not just pregnancy
3. Maintain improvements in access to clinical care, while also advancing meaningful policy changes to improve community conditions

See pages 3-4 for guidance and resources on these action steps.

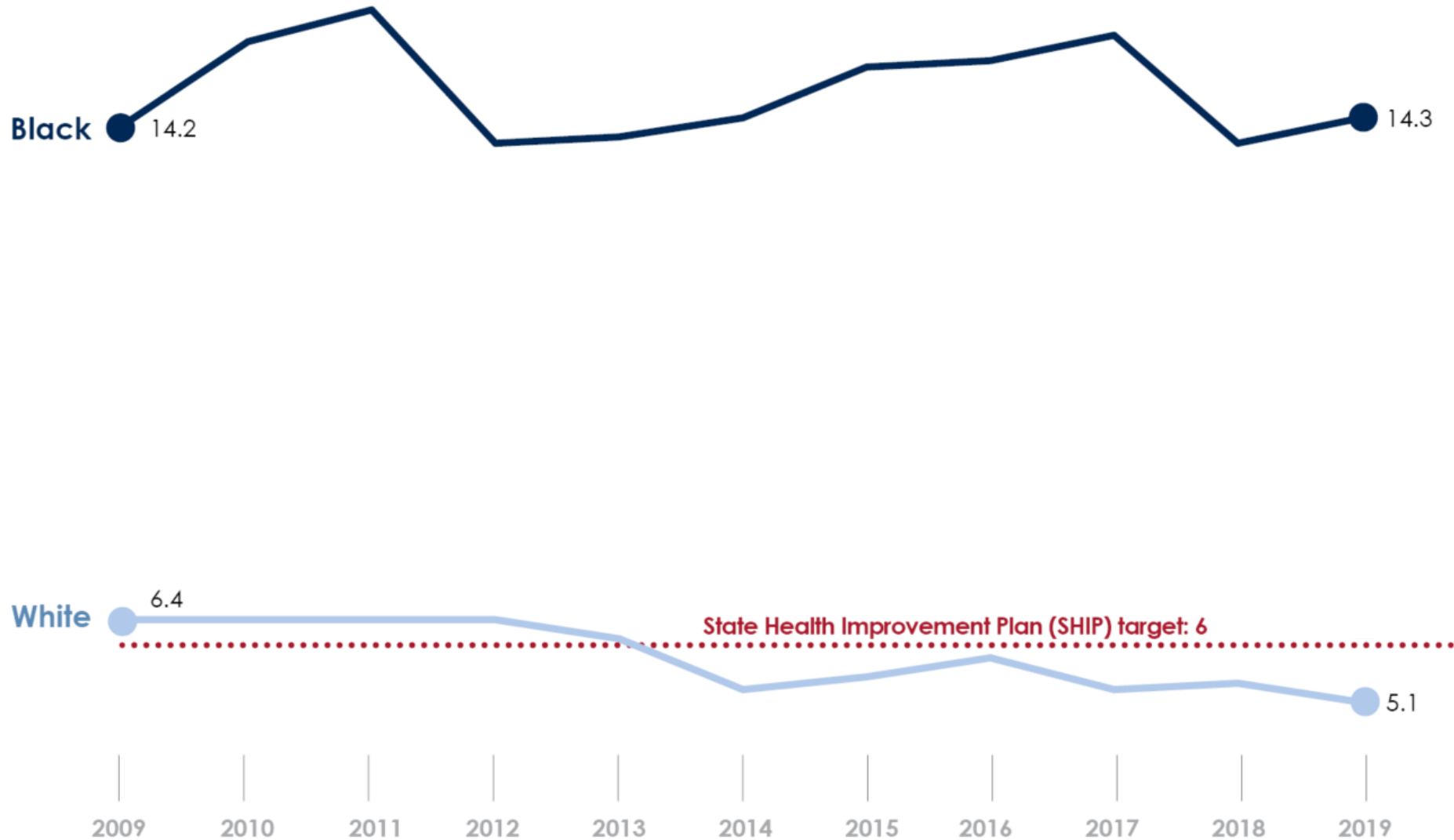
Figure 1. Infant mortality rate (per 1,000 births) by race, Ohio (2009-2019)



Source: Ohio Department of Health.

Infant mortality rate

per 1,000 births, by race, Ohio (2009-2019)



Source: Ohio Department of Health

Racism is a primary driver of disparities

Primary drivers of inequity



Policy and system inequities



Disparities in outcomes

Racism*



- Trauma
- Exposure to violence
- Toxic stress
- Stigma

Healthcare and public health system
Social and economic environment
Physical environment



Disparities in health behaviors



Disparities in overall health
Disparities in health outcomes

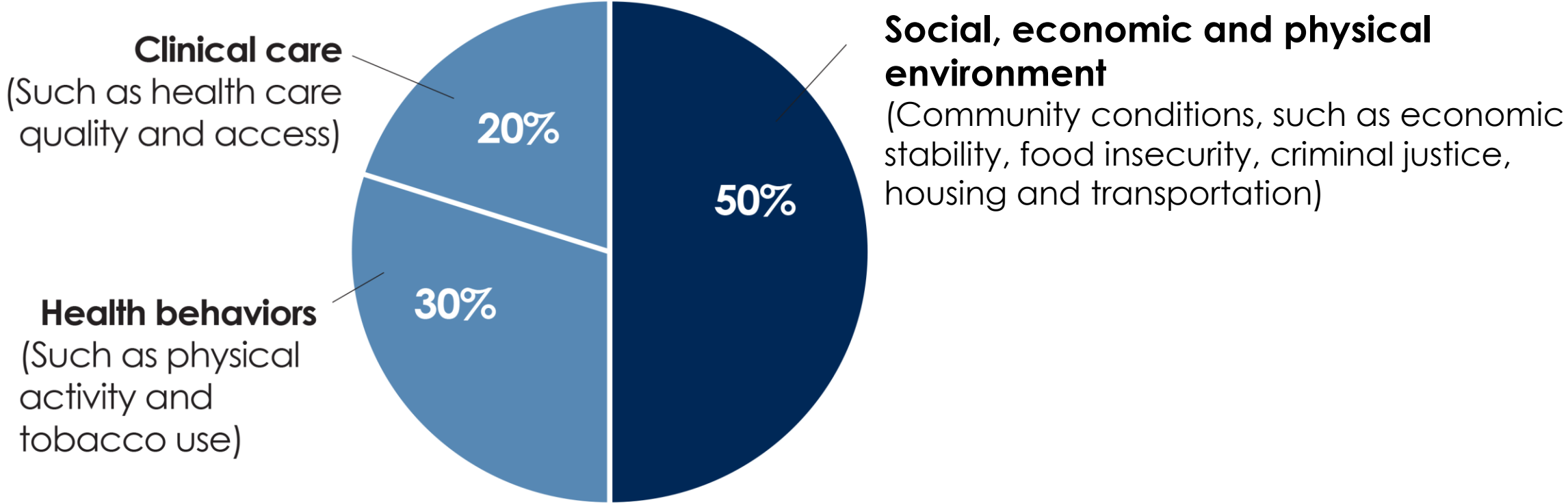


Cumulative impact across the life course and generations

* Structural, institutional, interpersonal and internalized racism

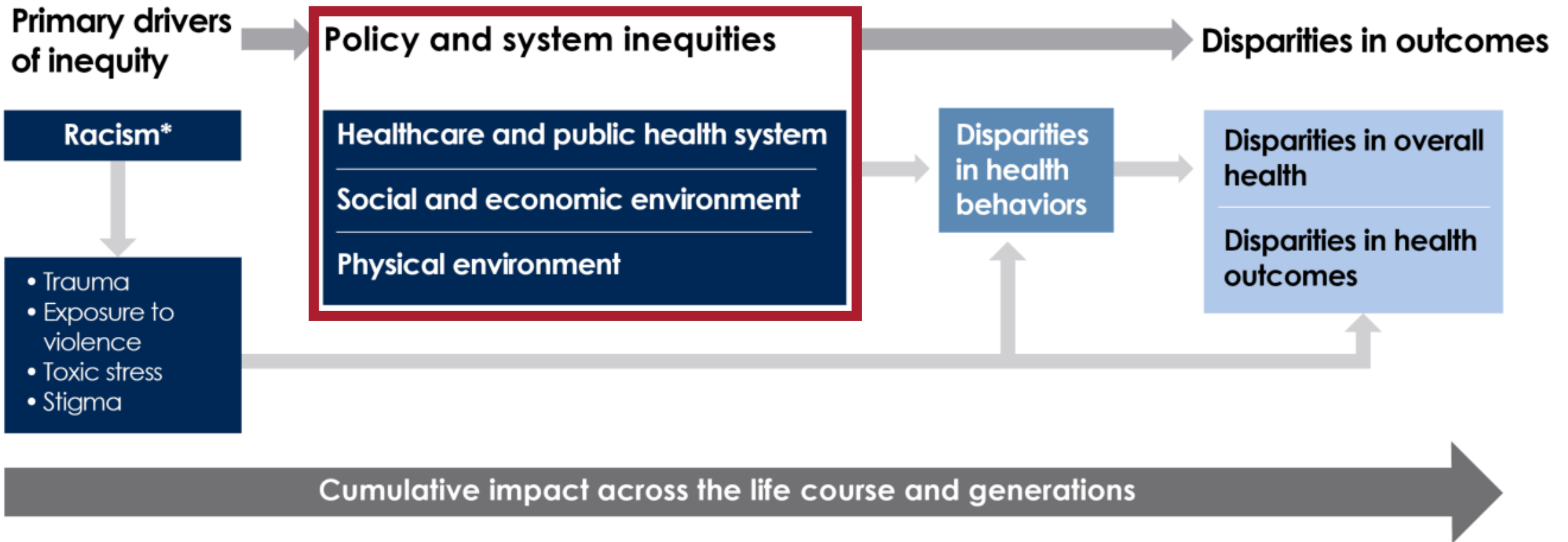
Source: Adapted from a diagram developed in partnership with the COVID-19 Minority Health Strike Force formed under Gov. Mike DeWine

Access to healthcare is necessary, but not sufficient.



Underlying drivers of inequity
Racism and other forms of discrimination (i.e., ableism, ageism, sexism, xenophobia, homophobia, etc.), trauma, exposure to violence, toxic stress, stigma

Source: Booske, Bridget C. et. Al. *County Health Rankings Working Paper: Different Perspectives for Assigning Weights to Determinants of Health*. University of Wisconsin Public Health Institute, 2010.

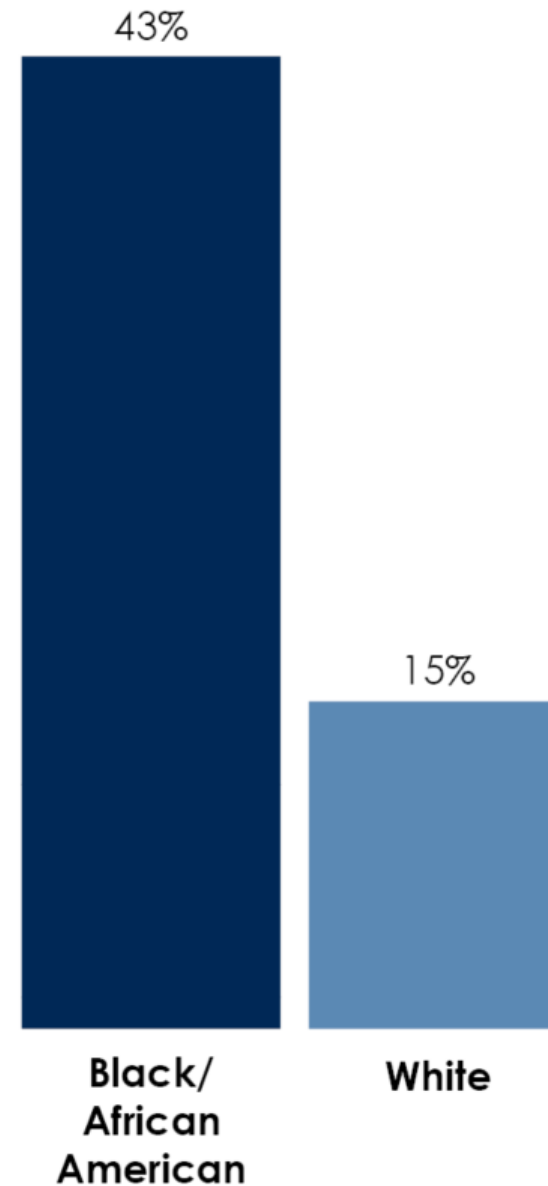


* Structural, institutional, interpersonal and internalized racism

Source: Adapted from a diagram developed in partnership with the COVID-19 Minority Health Strike Force formed under Gov. Mike DeWine

Child poverty

Percent of people under age 18, in households with incomes below the federal poverty level 2015-2019



Source: U.S Census Bureau, 2019 American Community Survey 5-year estimates - Tables C27001A, B, D and I, B18130

Pregnancy is not the only period of time that matters.

Birth

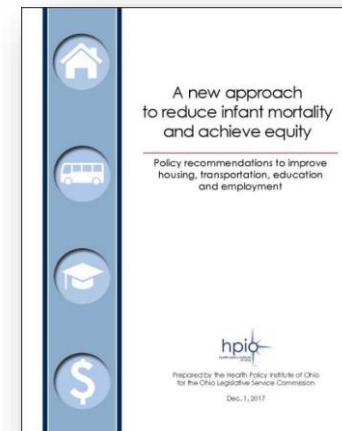
Pregnancy



Adverse childhood experiences

What can Ohio do?

1. Dismantle racism and address its consequences
2. Improve health across the life course
3. Advance meaningful policy changes to improve community conditions





Contact

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raly@hpio.net



HPIO core funders

- bi3
- CareSource Foundation
- The Cleveland Foundation
- The George Gund Foundation
- HealthPath Foundation of Ohio
- Interact for Health
- Mercy Health
- Mt. Sinai Health Care Foundation
- Nord Family Foundation
- North Canton Medical Foundation
- Saint Luke's Foundation of Cleveland
- Sisters of Charity Foundation of Canton
- Sisters of Charity Foundation of Cleveland



Connect with us

Social



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[linkedin.com/healthpolicyohio](https://www.linkedin.com/company/healthpolicyohio)

Email

- HPIO mailing list (link on our homepage)
- Ohio Health Policy News (healthpolicynews.org)

www.hprio.net

Questions & Answers

Moderated by our caucus co-chair, Representative Allison Russo

For legislators and legislative staff, please feel free to unmute yourselves to ask questions or share feedback.

For all other participants, please use the chat feature.

Thank you for joining today's webinar!



For more information on upcoming Ohio Legislative Children's Caucus webinars and meetings, please contact Alison Paxson at apaxson@childrensdefense.org