



Topline Report CSC Black Infant Health Practice Initiative Qualitative Research

Background

A \$1 million Black Infant Health Practice Initiative study aims to look at conditions in Florida, as well as medical and social factors that contribute to a higher rate of infant mortality among blacks. According to the Florida Department of Health, the number of black infants per 1,000 live births who died before their first birthdays increased from 10.7 in 2001 to 11.5 in 2006. By comparison, black infant mortality in Palm Beach County is decreasing and the CSC wants to understand factors that may be contributing to this positive outcome and the services/programs that may be influencing the decrease.

SRA conducted a series of six consumer focus groups and a series of Individual Depth Interviews (IDIs) among physicians to meet the project objectives. The research was segmented as follows.

METHODOLOGY	RESPONDENTS	LOCATION
1 focus group	Teen moms, African American	Glades
1 focus group	Teen moms, African American	Coast
1 focus group	Females, Haitian	Glades
1 focus group	Females, Haitian	Coast
1 focus group	Females, African American	Coast
1 focus group	Males, African American	Coast
6 IDIs	Physicians (pediatricians and OB/GYNs)	County-wide

The intent of this topline report is to provide an initial overview of some of the key findings from research and should not be used as a final analysis since some information may be missing. A detailed report will follow.

Reasons driving greater infant mortality

The reasons given by physicians and consumers were similar, with stress and lack of financial resources/poor socio-economic conditions and babies having babies being at the top of the list for most.

Drug abuse, lack of access to rehab, and cigarette smoking were also emphasized by physicians and some fathers as being significant factors (items not emphasized by mothers.)

Further, several physicians emphasized poor nutrition and the outcomes it presents, such as obesity and diabetes, as a contributor – another factor not mentioned by mothers.

Other reasons mentioned repeatedly include:

- Lack of:
 - Access to quality health care
 - Transportation
 - Support systems with correct information
 - Parenting information
 - Motivation/accountability
 - Quicker access to Medicaid

Differences between Haitians and African Americans

There are more differences between Haitians and African Americans than similarities.

One major similarity was the resistance or telling others they were pregnant when they found out. For Haitian women it is cultural, with many feeling letting others know during their first trimester may create bad luck or jealousy. By comparison, African Americans, particularly teens, do not talk about it initially because they are in denial or do not want relatives to judge.

Another similarity is lack of awareness and interest in the importance of pre-conception care.

Identified differences between African Americans and Haitians, based upon what respondents said, include:

- In spite of a greater risk of food insecurity, Haitians (particularly unacculturated) appear to eat a healthier diet than do African Americans.
- African American teens accept and even promote pregnancy at a young age, according to respondents.
- Haitian women feel it is a stigma to become pregnant as a teenager or out of wedlock.
- Haitian respondents emphasized, in their discussions, the need to discipline children as infants, toddlers, and teenagers. This was not a topic of conversation among African Americans.
- Most of the infants of African American respondents are raised by women (infant's mother, mother's mother, or grandmother) while a majority of Haitian respondents appear to be in a relationship with their child's father who is, in many cases, living with them.
- Many African American respondents have had children by multiple men, while Haitian respondents appear to more monogamous.
- African American respondents tended to have more children than do their Haitian counterparts. It was not uncommon for several African American respondents to indicate that their "role model" - their mother - had eight or more children, with several of the teenage moms having had multiple children themselves. By comparison, most of the Haitian respondents had two to three children, at most.

- Haitian women, particularly in Belle Glade, place a higher level of importance on getting an education/finishing school than do many African American women. Two of the Haitian women randomly recruited to attend the Belle Glade group have some college education. Some of the teenage African American respondents in the Glades may not finish high school, with few having indicated a motivation to obtain a higher level of education.
- Most Haitian respondents planned their pregnancy, while a majority of African Americans were surprised. A few teen African American moms were not aware of their pregnancy until their fourth month when some found out by accident.
- There was a greater incidence of fetal or infant death mentioned among African American respondents compared to Haitians. SRA does not know if this was coincidental or not.
- Both African Americans and Haitians listen to their doctors. However, African American respondents will follow/trust the advice of their mothers/grandmothers more than their doctors if there is a difference in opinion. By comparison, Haitians appear to have a high level of respect for a person of authority in a “uniform” than do African Americans and, for this reason, are more likely to follow a doctor’s advice over family members if a differing viewpoint exists.
- Haitian respondents tend to breast feed more often than African American respondents since the milk is “free” and they have heard that it makes the baby healthier. Most African American respondents have never had a mother/grandmother who breast fed and culturally do not consider it to be something that is done. Further, some African American respondents consider breast feeding something that is distasteful and hurts, with a few considering it “nasty.”
- More African Americans have health insurance coverage (Medicaid) compared to Haitian respondents.
- Haitian respondents appear far less knowledgeable about available services than do African Americans.
- More African American respondents mention the use of cigarettes and other drugs, as well as the desire to “go clubbing.” None of the Haitian women indicated a predisposition or desire for these activities. Anecdotally, it appears that alcohol and drug use in the Haitian community is more male oriented.

Differences between Haitians - Belle Glade vs. Coast

Belle Glade respondents were more accepting of lack of services, while those living along the Palm Beach County coast were more demanding and had far greater expectations.

Much higher levels of awareness exist for available services along the coast compared to Belle Glade.

Some of those living in Belle Glade do not know/consider their resident county to be Palm Beach.

Belle Glade Haitians did not understand the briefly tested Expect Wonder video and wanted to see more tangible information regarding the availability of help. By comparison, the more "demanding" coastal Haitian respondents will grab onto and pay attention to any outreach they see that can help them.

Major themes identified by physicians interviewed

These physicians feel there is an increase in teen pregnancies among African American girls due to:

- Lack of awareness of family planning
- Low self-esteem/nothing else working for them so they have a baby
- Lack of supervision
- Immaturity
- No strong role models

Most misconceptions held by particularly African American teen mothers rest at the foot of their mothers and grandmothers who are trusted and often provide incorrect information.

The major misconceptions that physicians feel exist for both black teen and adult mothers include:

- Need to use birth control/disconnect between intercourse and pregnancy
- Lack of awareness of the importance of good pre-conception and post-conception nutrition
- Importance/value associated with breast feeding
- Feeding infants solid food too soon/giving infants inappropriate food
- Inconsistent understanding of SIDS
- Inconsistent understanding of second-hand smoke
- Issues related to sleeping with their babies
- The life altering consequences of having babies (predominantly teens)
- Importance of pre-natal vitamins

According to physicians, most Black mothers they see ask very few questions during their pregnancy, with some of the areas of concern including:

- When can I give the baby solid food?
- How do I handle gas?
- What is a normal bowel movement?

Major themes identified by African American teen mothers

A majority of the teen mothers included in the research range in age between 15 and 18 years, with some having given birth for the first time at age 13.

Several have personally experienced or know a person who has experienced a fetal demise, with the reasons indicated being:

- Got into a fight at school with another girl while six months pregnant
- Very rough sex
- Premature infants

The teen mothers, on the surface, appeared to be somewhat detached from a fetal demise.

Major themes among teen mothers include:

- Pregnancy as a teen is considered the norm
- Some girls are almost competitive as to which can have the cutest baby
- Exhibited a sense of hopelessness/lack of self-esteem
- Many have had babies because:
 - They want something in their life to love them back
 - See it as a way to collect money
- Sexually active with multiple partners
- Drug users
- On average, do not seek pre-natal care until the end of the first trimester/beginning of the second trimester
- Consider pre-conceptual care of limited relevance
- Most not in a relationship with the father(s) of their babies
- Surprise to find out they were pregnant
- Some had considered abortions
- Most common concern – pain associated with delivery

Major themes identified by African American fathers

Major themes identified by African American fathers include:

- Are fathers of multiple children by multiple women
- Do not believe in/take responsibility for birth control
- Most not in a relationship with the mothers of their children
- A few have had problems with the law/are convicted felons
- None have sole responsibility for their children
- Some played an active role in pre-natal care and most were involved at time of delivery
- All consider themselves actively involved with their children, with many feeling they could do a better job of raising their children than the mothers
- Most are frustrated with the mothers of their children due to the perception that they are:
 - Lazy
 - Only interested in money
 - Not educated personally and about how to best care for children
 - Self-absorbed/not willing to put children first
- Were raised by females and appear to have some knowledge of what females should do in regard to pre-natal and maternal care
- Their mother is their primary source of information

- Unlike the females, a few males mentioned that the information provided by mothers and grandmothers is not always correct

Major themes among adult African American women

- A majority are single mothers
- Fathers of their children have:
 - Been killed
 - Been put in prison
 - Left them
 - Been abusive
- Rely upon subsidies to survive
- Disconnect with benefits associated with:
 - Breast feeding (Some are aware of benefits, however feel it is an inconvenience/doesn't fit in with their lifestyle.)
 - Eliminating use of alcohol and drugs
 - Not sleeping with infants
- Do not consistently use birth control while sexually active
 - Pointed out that African American community does not consider oral sex "sex" while Caucasians do

Reasons given for improved pre-natal care and maternal care

The physicians interviewed provided the most insights and mentioned:

- Good delivery of services by the Health Department
- Healthy Start
- SOBRA
- RIBIC
- Healthy Mothers/Healthy Babies
- Palm Health Pavilion

The parent respondents were not able to be very specific, with some doubting that pre-natal and maternal care has improved.

Recommendations provided

Recommendations provided by physicians include the following.

- Provide a greater depth of education in school
 - Sex education
 - Impact of having babies
 - Importance of exercise and nutrition
- Establish peer to peer education in the community
- Hire and educate mothers of teenage girls/grandmothers, at a nominal fee, to meet with other mothers/grandmothers in churches to educate them/spread information
- Hire and educate Haitian mothers and African American teen and adult mothers to meet with their peers to educate/spread information

- Create a hotline for information
- Provide information on TV and radio
- Provide more family planning/birth control education
- Eliminate the transportation barriers by:
 - Creating clinics in the neighborhoods
 - Provide ancillary services in the immediate proximity of private practice physicians serving the Black population
- Get kids more involved in out of school activities to build self-esteem and get them off the streets

Recommendations by mothers/fathers include:

- Create and employ a peer to peer education program
- Make it easier to get on Medicaid (particularly Haitian population)
- Use more children of varying shades of color in video