Listening to Families, Improving Outcomes: Community Insights on Infant Mortality

Webinar Hosted By Groundwork OHIO

September 15, 2026
2:00 pm

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Senior Director
First Year Cleveland

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HOUSEKEEPING

- Today's webinar is being recorded.
- Closed captioning is available in your Zoom settings.
- All participants are muted.
- Please use the Q&A button for questions.
- If we can't get to your request or question during the event, we will follow-up after the event if you provide your email address with the question.
- All participants will receive a recording of the webinar via email after the event has concluded.

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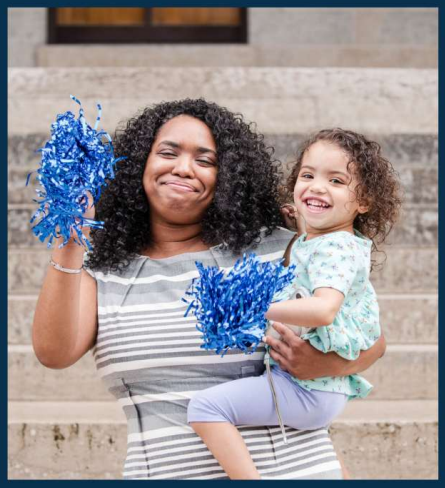
WHO WE ARE

Groundwork OHIO

Groundwork Ohio is a statewide, nonpartisan nonprofit that champions young children from the prenatal period through age five.

We transform research into action through policy development, advocacy, strategic communications, and movement building. By elevating family voices and bringing people together around solutions that work, we build the public will and bipartisan support needed to improve outcomes for young children and families.

Together, we are creating a movement to make Ohio the best place in the nation to be a young child.



www.GroundworkOhio.org

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THE INFANT MORTALITY CRISIS

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OHIO IS MAKING PROGRESS, BUT THE WORK ISN'T FINISHED

6.6

Ohio's 2024 infant mortality rate per 1,000 live births

5.1 White, non-Hispanic | **12.6** Black, non-Hispanic | **6.7** Hispanic

Black babies remain 2.5x more likely to die before their first birthday than white babies.

Source: 2024_IM_Annual_Report

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SUSTAINED INVESTMENT MAKES A DIFFERENCE

$36 million

in infant vitality investments in the FY26-27 state budget (House Bill 96)

including **$5 million** for community- and faith-based infant vitality efforts.

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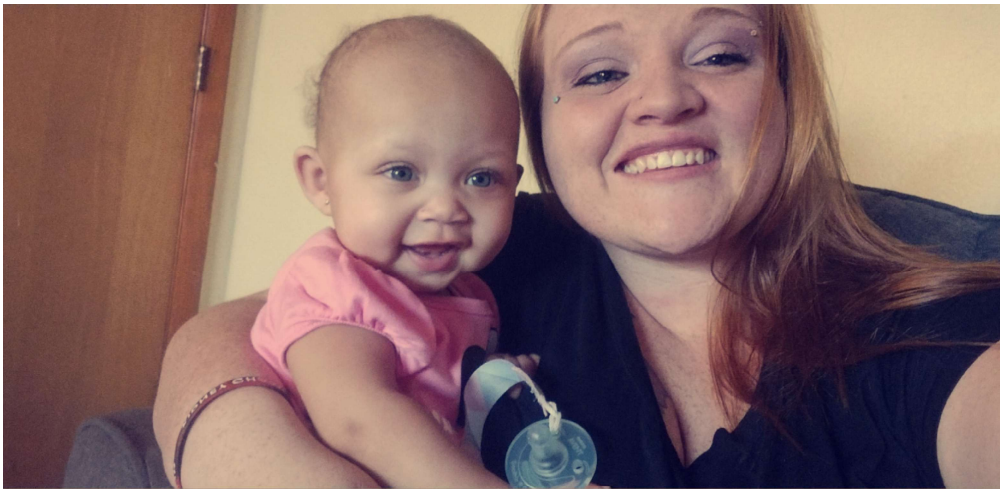
THE WORK AHEAD



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SETTING THE STAGE

- Ohio's Partner for Change initiative
- Partnership with Queens Village
- Why listening sessions matter; families are the experts on their own experiences
- Today's goal: Learn what communities heard and what needs to change

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SPEAKERS
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Roots To Rise Dayton
Nurturing Moms & Babies
September 15, 2026

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Our Mission
We exist to improve the health and well-being of moms and babies by engaging families, eliminating disparities, and empowering communities to create lasting change.
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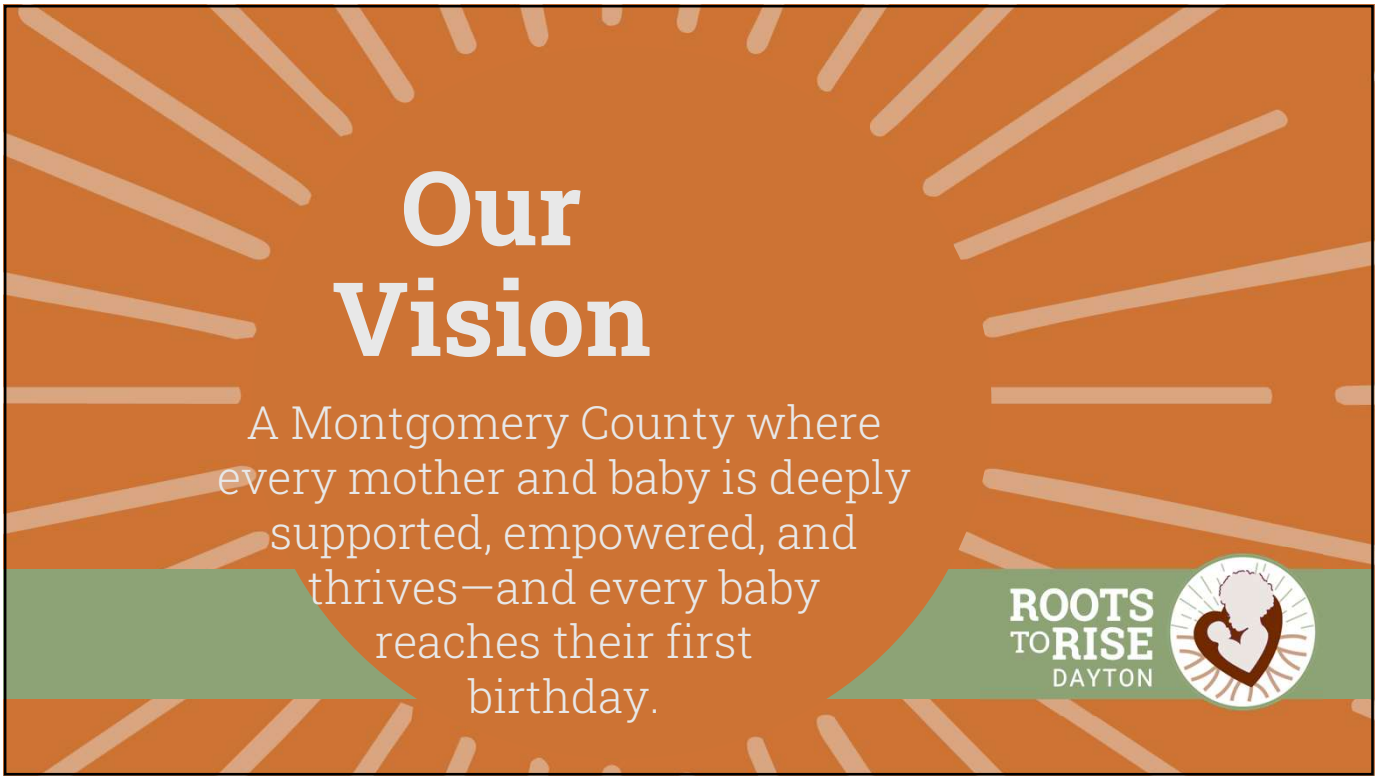
Our Vision
A Montgomery County where every mother and baby is deeply supported, empowered, and thrives—and every baby reaches their first birthday.
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Community Assets Mapping Framework

Community Assets were organized across the continuum of care and social drivers of health, including:

- Maternal Clinical Providers
- Pediatric Providers
- Maternal Mental Health & Recovery Services
- Maternal & Family Services – Public Health and Community Organizations
- Faith Based Organizations
- SDOH -Economic, housing, and access-related services

Developing a resource map based on community feedback to ensure trust, access, & quality.

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What we heard from Community Members?

"Able to show up authentically without fear, being judged, losing a baby or looked differently"
"Empower- Be honest, transparent and allow me the opportunity to make decisions not be told"
"Access to more providers they trust."
"More mental health support; provider's awareness of resources."

- Feeling Unheard or Dismissed by the providers.
- Experiences of Racism in Healthcare
- Stress affecting Maternal Health due to Social Drivers of Health
- Prenatal/Postnatal Appointment issues.
- Lack of Postpartum & Mental Health Support; Postpartum Depression, Stress.
- Lack of Transparency and Empowerment –in terms of decision making
- Inadequate Prenatal Care Utilization –due to lack of awareness.

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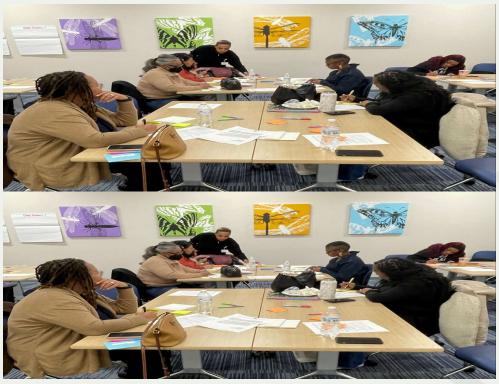
Community Needs – Key Themes

Based on community needs assessment and asset mapping and earlier listening sessions, we categorized community insights into five major themes:



Queens Village Dayton co-design session

- Respectful, Equitable and Empowering Care.
- Access to Prenatal and Postpartum Care
- Maternal Mental Health and Emotional Well-Being
- Social Drivers of Health and Daily Stressors
- Community Support and Trusted Messengers

These were validated and prioritized top three areas by Queens Village for strategic action

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Community Recommended Strategies

Priority 1: Respectful, Equitable and Empowering Care

Improve care experience by ensuring mothers feel heard, respected, and empowered through strong relationships, culturally responsive care and shared decision-making.

Strategies:

A: Advancing culturally responsive and compassionate care practices

B: Strengthening relationships between mothers and their care teams

C: Establishing healthcare-based advisory structures with black women as active partners in accountability and decision-making

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Community Recommended Strategies

Priority 2: Access to Prenatal and Postpartum Care

Increase timely, continuous, and equitable access to prenatal and postpartum care by strengthening navigation, improving collaboration across systems and expanding service availability.

Strategies:

A: Strengthening referral pathways between community organizations and healthcare systems.

B: Increasing visibility and accessibility of resources in healthcare settings

C: Increase appointment availability, including evenings and weekends

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Community Recommended Strategies

Priority 3: Maternal Mental Health & Emotional Well-being

Ensure mothers have access to supportive, culturally responsive mental health resources and environments that promote emotional well-being.

Strategies:

A: Strengthening connections to culturally responsive mental health providers and resources

B: Integrating maternal mental health education into prenatal & postpartum care

C: Expanding peer-led support spaces that provide safe environments for sharing, healing, and ongoing support

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Cross-Cutting Strategies

Supportive, Transparent, and Accountable Care Environments
Advance care environments to ensure consistent, relationship-based care by embedding accountability, transparency, and integration of trusted support roles

How This Moves Forward with Healthcare Partners

- **Support continuous, relationship-based care across the perinatal period** *(including advancing doula-friendly environments within healthcare systems)*
- **Use data to drive quality improvement and accountability** across systems
- **Increase visibility of care quality** to support informed decision-making for families *(including advancing a "Mama Certified" approach at the practice level — experiences, outcomes, and quality indicators)*

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AI1

A Seat at the Table - Strengthening Provider Patient Relationships

- Collaboration with Wright State University Boonshoft School of Medicine and Queen's Village Dayton
- Facilitated dialogue between mothers and providers to build trust and strengthen partnerships.

Key Themes from the Table Talks

1. Engagement, Trust, Respectful & Inclusive Care:
"Trust is needed with providers... it takes time to build rapport."

2. Communication & Information Sharing:
" make the effort to listen, ask, not assume."

3. Support & Connection to Resources:
"Lack of visibility for the vast majority of programs."

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Next Steps

- **Advance doula-friendly hospital environments** through continued collaboration with hospital leaders and doulas.
- **Establish or strengthen community advisory and feedback structures** that center Black women's experiences in healthcare improvement.
- **Expand provider–community dialogue opportunities**, including Table Talks and other facilitated conversations.
- **Strengthen care coordination and referral pathways** by connecting families to trusted community-based resources.
- **Align maternal and infant health partners around shared priorities** to reduce duplication, address gaps, and support sustainability.

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Questions?

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Lucas County Partners for Change (PFC)

Crystal King, MPH
September 15, 2026

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Key Accomplishments

- **Strengthened partner alignment and shared ownership**
  - Established Executive Committee & Learning Collaborative co-leads
  - Increased alignment, collaboration, and trust
  - Submitted and supported shared grant applications
- **Strengthened data-driven collaboration**
  - Monthly data review & integrated Cause of Death review process
- **Engaged communities in strategy development**
  - 5 Queens Village Toledo listening sessions
  - 3 community co-creation sessions
  - Draft IM Reduction Framework

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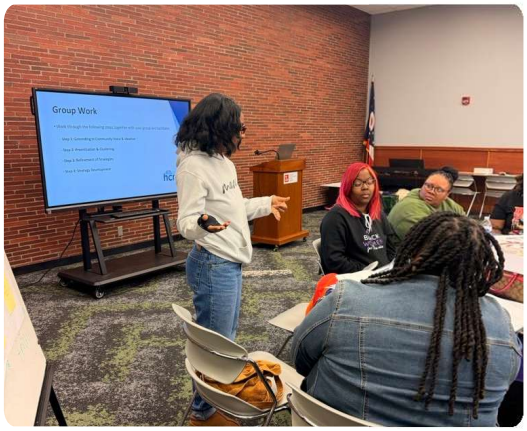
Key Themes Identified

Maternal Mental Health & Social Support Gaps

- Mothers reported persistent stress, overwhelm, anxiety, and depression
- Limited familial or partner support contributed to isolation during the perinatal period
- Lack of consistent emotional and social support made navigating pregnancy and parenting more difficult
- Maternal mental health challenges impacted other areas of mothers' lives



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Key Themes Identified

Inequities in Maternal Healthcare Access, Experience & Navigation

- Mothers reported feeling dismissed, unheard, or disrespected in healthcare settings
- Difficulty accessing appointments created additional barriers to care

Economic Insecurity & Housing Instability

- Financial strain, housing instability, and employment challenges were recurring stressors
- Childcare barriers added to financial and emotional strain
- Basic needs impacted well-being, with pregnancy often described as "bittersweet"

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Next Steps

- **Begin Interventions based on Community Identified Goals**
  - **Goal 1:** Strengthen Maternal Mental Health, Social Support, and Community Connection
  - **Goal 2:** Improve Access, Trust, and Experience in Maternal Healthcare
  - **Goal 3:** Strengthen Economic Stability and Address Social Drivers of Maternal and Infant Health

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OHIO BETTER BIRTH OUTCOMES

OBBO / Partners for Change
September 2026

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Ohio Better Birth Outcomes (OBBO)

Nationwide Children's · The Ohio State University Wexner Medical Center · Mount Carmel · OhioHealth Believe in We · Heart of Ohio Family Health · Lower Lights Health · PrimaryOne Health

Mission

Reduce the infant mortality rate in Franklin County by improving the delivery of health services for women and their families using quality improvement science to guide our work.

Strategies

1. Direct funding to support evidence-based community programs
2. Shared QI projects to reduce prematurity- and sleep-related deaths

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Unique Data Access

ODH – Birth and Death Files

NCH Data & QI Teams

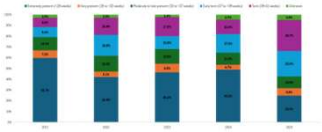
1. Independent Review & Aggregate Findings

Peer Review Protections: ***ORC §2305.251 (Peer Review Committee Immunity)***

OBBO Peer Review Committee

Peer Review Protections: ***ORC §2305.252 (Confidentiality of Peer Review Information)***

2. Outcome and Indicator Reporting



3. Shared Project Metric Tracking

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Partners for Change
Deliverables

OHIO BETTER BIRTH OUTCOMES

Data, Cause of Death & Gap Analysis

Informed by: Data trends, FIMR, CFR, hospital system chart reviews, coroner reports, Big Cities research

Complete

Qualitative Focus Groups

Goals: (1) Validate themes from prior qualitative study and (2) identify solutions

Complete

Strategic Framework & Prioritized Interventions

Informed by gap analysis + listening sessions

Implement new or expanded strategies

We are here!

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Gap Analysis: Overview of Past Data Shared

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- ODH Vital Stats
- CPH 2025 FIMR & CFR Results
- Hospital-specific chart reviews
- Big Cities research
- Coroner reports
- Previously identified themes:
  - National decrease in prenatal care
  - Higher Infant Mortality in births with no prenatal care
  - No standardized approach in EDs for newly identified pregnant women
  - Substance use and marijuana shows up in sleep deaths and OBBO chart reviews

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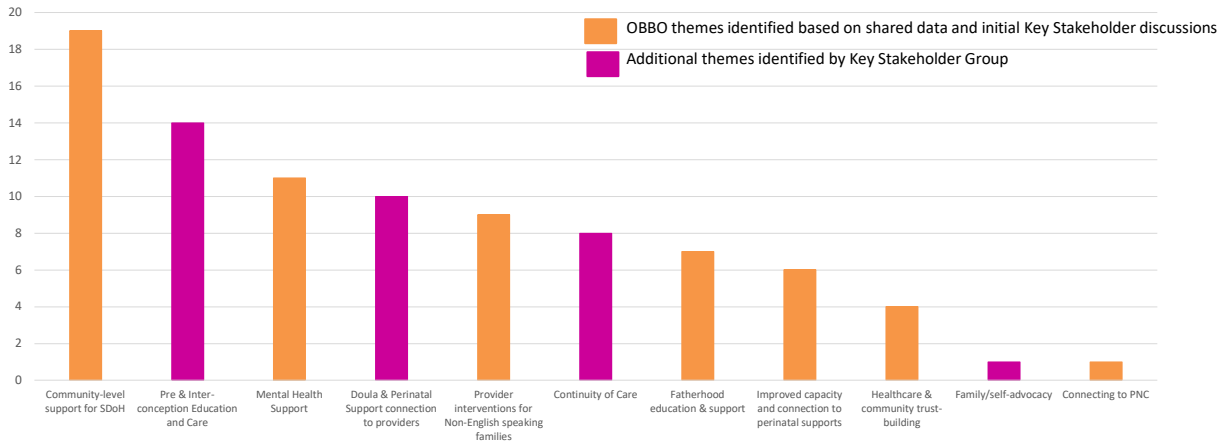
Partners for Change Stakeholders: Priority Votes for Infant Mortality Gap / Themes



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Overview of Focus Groups

Prepared by Dr. Kierra Barnett

OHIO BETTER BIRTH OUTCOMES

Completed 12 focus groups since March 2026

- Women were recruited from clinics and referred to the team by other women

Eligibility Criteria:

- Must be 16 years or older
- Self-identify as Black/African American
- Currently pregnant or have experienced a pregnancy since 2021
- Lived in Franklin County during the time that they were pregnant or when they gave birth
- Fluent in spoken English

58 women participated

- 39 of the 58 (67.2%) women reported experiencing a pregnancy complication. ***Note: THIS WAS NOT A REQUIREMENT TO PARTICIPATE***

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Qualitative Focus Groups

Prepared by Dr. Kierra Barnett

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1. Lack of Patient Centered Care
2. Changing Birth Plan
3. Selecting Health Care Team
4. Advocating and Support for Women
5. Differences in Care and Treatment
6. Access to Resources

Building upon prior qualitative work…

"I just want us to be heard": A qualitative study of perinatal experiences among women of color

Kierra S Barnett, Ashley R Banks, Tiffany Morton, Christine Sander, Maureen Stapleton and Deena J Chisolm

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Framework Themes

OHIO BETTER BIRTH OUTCOMES

- Increase births with prenatal care
- Increasing equitable clinical outcomes across maternal and infant health

- Increase capacity for additional perinatal support workers and providers that more closely identify with the population being served
- Strengthen continuation of care between providers from pre to inter-conception

- Support mental health during pregnancy and postpartum, including family safety
- Create spaces for community building

- Facilitate trust-building between health organizations and the community
- Supporting self-advocacy

- Increase pregnancy and parenting education and support, including fatherhood
- Provide resources to Non-English Speaking families

- Offer community-level support for social determinants that impact infant mortality

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Next Steps

OHIO BETTER BIRTH OUTCOMES

- Finalize Strategies, Priority Interventions and associated Outcome + Process Measures
  - Final draft by 9/30
  - Socialize at next Key Stakeholder meeting 10/20
  - Begin implementation 1 new intervention by 10/31
- Assign accountability and lead organization(s)
  - In collaboration with CelebrateOne
- Begin broader implementation

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Cuyahoga County – Partners for Change

nli neighborhood leadership INSTITUTE

Better Health Partnership
Collaborating for a healthy community

CCBH CUYAHOGA COUNTY BOARD OF HEALTH
Your Trusted Source For Public Health Information

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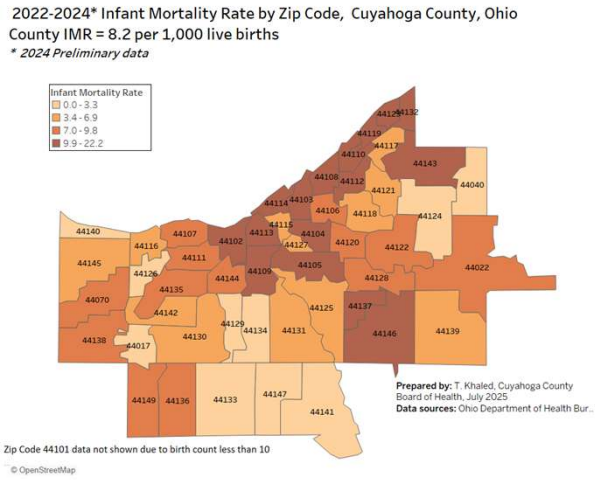
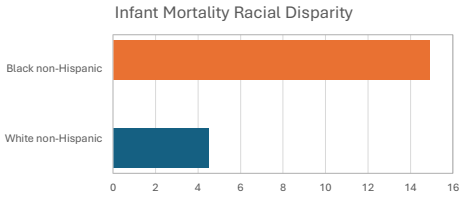
Cuyahoga County - Infant Vitality Indicators



ZIP Code	2022-2024 IMR	ZIP Code	2022-2024 PTB
44103	22.2	44103	20%
44110	22.2	44104	19%
44105	18.4	44112	17%
44108	14.7	44105	17%
44104	13.8	44120	17%
Cuyahoga	**8.2**	**Cuyahoga**	**12.2%**
Ohio	**7.0**	**Ohio**	**10.8%**



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Community Listening Sessions

Queen's Village (QV), led by Neighborhood Leadership Institute (NLI), recruited Black women from 5 targeted ZIP Codes.

- The goal was to complete 5 listening sessions by March 31st.
- NLI Queen's Village conducted 8 listening interviewing 40 moms

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What We Heard

- Antepartum anxiety about pregnancy/motherhood
- Healthcare interactions mixed
  - Birthing process (mostly negative)
    - Several appreciated their Doula
  - In-hospital, postpartum care (mostly positive)
- Postpartum feeling overwhelmed & managing SDoH stressors
- Mom's health
  - Chronic & acute health concerns
  - Lack of body awareness and understanding of bodily changes

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Little Aha Moments

- Though many dealing with hardships – motherhood joy shined through
- The dichotomy between delivery angst & in-hospital bliss between delivering Moms and healthcare institutions
- Many on a continuing journey to learn and grow

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Top Recommendation

- Improve Birth Experiences for Black Women
  - Build trust
    - Listen!
    - More individual time with doctors to help patients understand circumstances around their pregnancy and birth
  - More culturally responsive

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We depend on first responders.
They depend on child care.
Marvin Jones
Central Ohio Firefighter/Paramedic
ADVOCACY ALERT
Groundwork OHIO
Action for Children

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Groundwork OHIO
VOTE BABY VOTE
Schedule my checkup
Keep me healthy
Register to vote
PARTNER TOOLKIT

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ROADSHOW
2026
EVERY STOP. EVERY STORY.
DRIVING CHANGE.

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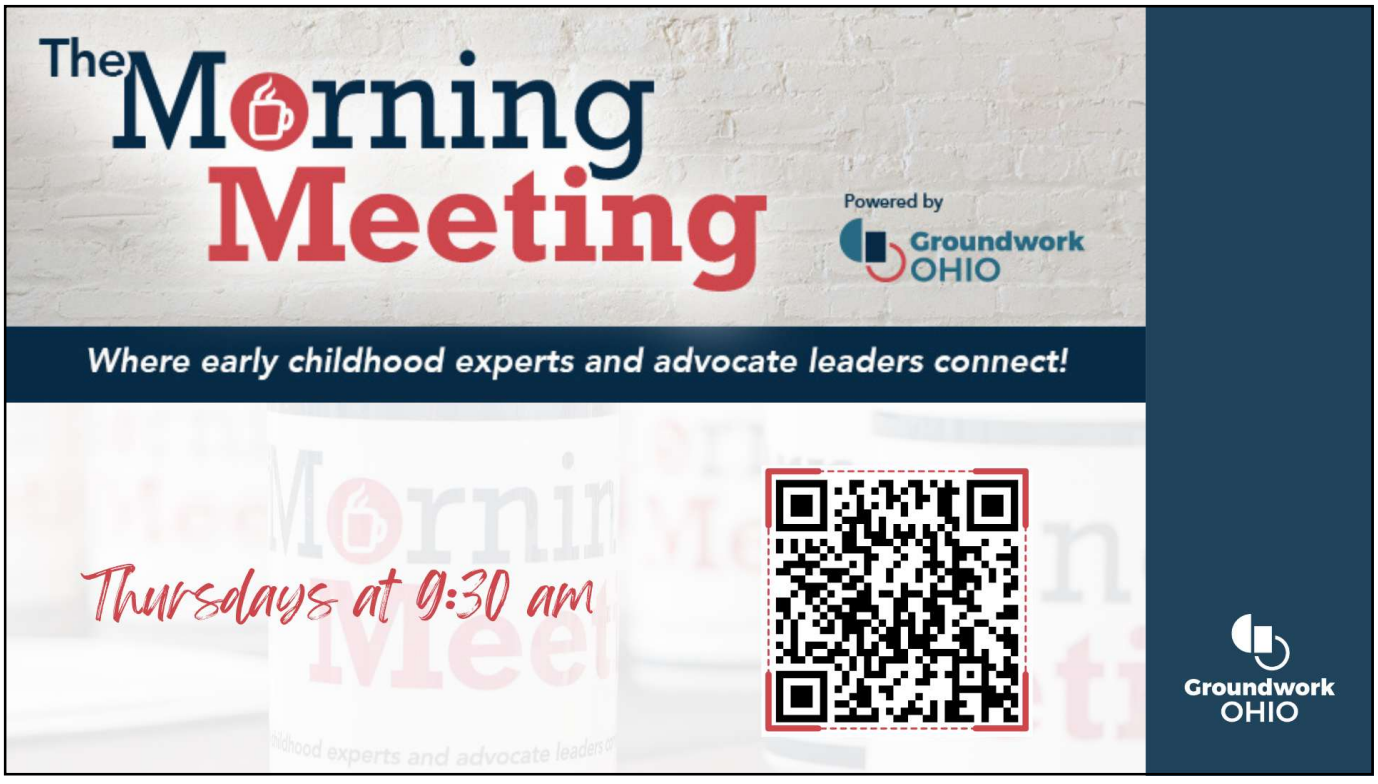
The Morning Meeting
Powered by
Groundwork OHIO
Where early childhood experts and advocate leaders connect!
Thursdays at 9:30 am
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