Healthy Births Initiative Evaluation: Research Brief

Overview

Focused on First 5 LA’s goal that “Children are born healthy,” the Healthy Births Initiative (HBI) seeks to improve outcomes for pregnant women and their families, reduce the chance of experiencing subsequent poor birth outcomes, and build a network of services that address the needs of pregnant women and their families.

Since 2005, pregnant and postpartum women living in high-need areas of Los Angeles County have received HBI-related services through the Best Babies Collaboratives (BBCs). All BBC clients live below the 300% federal poverty line; many are unemployed (87 percent)\(^1\), under the age of 25 (57 percent), and do not have a high school diploma (65 percent). They also face challenges ranging from homelessness and domestic violence to chronic health conditions and a history of poor birth outcomes (See Exhibit 1).

Working toward improving these high risk women’s birth outcomes and their chances of having subsequent poor birth outcomes, BBCs provide **intensive case management services** – assessing their needs, setting goals, and providing referrals to community services. Case management is provided through home visitations and in BBC offices.

About the Evaluation

The purpose of the HBI evaluation is to help the First 5 LA Commission and staff understand the overall work and effectiveness of the HBI program, as well as to gather lessons learned to inform First 5 LA related work in family strengthening. The evaluation also provides useful insights and findings to share with the organizations involved with HBI including the BBCs and the LA Best Babies Network (LABBN), which provides advocacy and technical assistance to the BBCs.

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\(^1\) BBC client data represented in this section and in Exhibits One is based on client intake data from 2008 through 2012.

Exhibit 1: BCCs Clients’ Needs at Intake (N=2100)

<table>
<thead>
<tr>
<th>Chronic Health Conditions</th>
<th>49%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Support Services</td>
<td>40%</td>
</tr>
<tr>
<td>Transportation</td>
<td>25%</td>
</tr>
<tr>
<td>Housing &amp; Homelessness</td>
<td>23%</td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>8%</td>
</tr>
<tr>
<td>Immigration</td>
<td>5%</td>
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</tbody>
</table>

Since HBI services impact babies, mothers, families, and communities in a variety of ways, the evaluation was designed to capture change at multiple levels.

More specifically, focus groups and surveys with LABBN, BBCs’ staff, and BBCs’ clients, as well as former client surveys and BBC client data from 2008 through 2012 were analyzed. In order to benchmark BBC clients with Los Angeles County mothers, the evaluation used a secondary data set originating from the Los Angeles Mommy and Baby (LAMB) survey.\(^2\)

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\(^2\) The Los Angeles Mommy and Baby (LAMB) survey dataset is a sample of Los Angeles County residents who delivered a baby two to six months prior to participation. The HBI evaluation utilized 2010 LAMB data. See [http://lalamb.org](http://lalamb.org) for further information.

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HBI Evaluation Research Brief 1
Key Evaluation Findings and Promising Practices

Participating in BBC services for at least six months significantly reduced the likelihood of a preterm delivery for women with similar risk factors and characteristics.

There was no significant difference between BBC women and LAMB respondents’ rates of preterm birth when maternal risk factors, such as age, education, race/ethnicity, and early prenatal care were controlled. However, when time of entry into the BBC program was considered, BBC clients who received six or more months of services were five times less likely to experience a preterm birth compared to both BBC clients who received less than six months of service or LAMB respondents.

Participating in BBC services can lead to sustained breastfeeding practices.

While LAMB respondents and BBC clients were equally likely to initiate breastfeeding in the hospital, BBC clients were significantly more likely to sustain breastfeeding at three and six months post-delivery; BBC clients experienced a 32.3 percent decrease in breastfeeding whereas LAMB respondents experienced a 48.7 percent decrease in breastfeeding. In other words, for every BBC client that terminated breastfeeding, there were 1.5 LAMB participants who terminated breastfeeding before her baby was six months of age. In addition, BBC clients reported having a more positive attitude toward breastfeeding and having reconsidered their original intention not to breastfeed because of the breastfeeding education and support provided by the BBCs.

Participating in BBC services contributes to an increase in client self-esteem, self-advocacy, and access to support.

BBC Case managers often became mentors and role models to the clients and helped the clients gain self-esteem and advocacy skills. In client focus groups, clients confirmed the impact of the BBCs on their self-esteem. One current client shared, “They tell you to be more positive and to accomplish what we want to accomplish. [Case manager] has taught me, that everything is possible. If a person thinks they can’t it’s not true. Yes you can and you have to do this. It pushed me and motivated me to get my driver’s license.”

“I did not want to do it at all. But I learned about different things and benefits like protecting my baby from getting colds, and all the nutritional benefits. Breastfeeding is like having a home cooked meal compared to McDonald’s.”

~Current BBC Client

BBC case management model and client-centered approach contributes to family strengthening with benefits beyond initial birth outcomes.

A resounding theme among clients and across BBCs was the importance of comprehensive case management and building relationships with clients. Given the multitude of socio-economic issues clients face, case managers focus considerable time and attention on building rapport and trust. Once case managers are able to establish trust, case managers learn how to effectively understand and address problems that directly or indirectly impact their client and their client’s family. Clients echoed the importance of building this trust and relationship, saying they felt increasingly comfortable sharing their concerns, issues, and fears over time. “...just being able to talk to [case manager] every month, it was like really supportive for me because I didn’t have to go through everything that I was going through alone. I had someone to talk to that I trusted. She had mine and my baby’s best interest in mind.”

Collaboration within BBCs has increased overtime, contributing to a comprehensive, integrated, and client-centered approach to care.

BBC members expressed that collaboration and their client-centered approach to care were key factors to their success. BBCs also had significant increases from 2010 to 2013 in eight of the 20 Wilder Collaboration Factors Inventory factors related to collaborative success: multiple layers of participation, adaptability, appropriate pace of development, open and frequent communication, established information relationships and communication links, flexibility, skilled leadership, and shared vision.

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Individuals highlighted that it was the degree of engagement and trust built with each other that aided them in helping clients resolve some of their most pressing challenges, such as issues related to housing, transportation, immigration, and domestic violence.

**Lessons Learned and Considerations for Future Work**

- **Recruit early into program to impact birth outcomes:** Participating in the BBC program for more than 6 months can impact a woman’s likelihood of having a preterm birth. Hence, early recruitment, enrollment, and continued services to high risk women as early as possible during their pregnancy are of great importance when trying to impact birth outcomes.

- **Build trust and relationship to affect breastfeeding attitude and behavior:** BBCs’ client-centered approach to case management and thoughtful alignment of services with the needs of clients and their families helped create trusting relationships between clients and case managers. In turn, this trust allowed clients to be more open to receiving breastfeeding education and support. Some of the key factors in this successful case management include inclusion of the client and family, warm-hand offs, and addressing barriers to participation such as meeting location and transportation.

- **Improve sustainability and continuity of services:** Short-term funding impacts the ability to sustain quality staff and make long-term commitments to clients, partners, and the community.

- **Maintain and expand relationships:** Over time the BBCs have developed relationships, reputation, and social capital in their community. In addition, the BBC case managers have experience and have received specific specialized training to address the needs of these high risk mothers and their families. The relationships, collaborations, and knowledge established from one initiative can benefit another if measures are put into place to preserve the social capital which has been developed in the community and strategies are developed to retain and utilize the specialized knowledge of case managers.

- **Capture the context and strategies that contribute to change:** While the current BBC client data system tracks important outcome data, it does not capture the contextual information and “stories” behind the data. In other words, documenting and discussing the efforts, practices, conditions, and strategies that “make change possible” is as important as measuring change itself. Quantitative and qualitative client data needs to be captured in a flexible, easy to use, and consistent manner. Create and enhance common data tracking across program sites, data entry handbook and training, as well as regular data quality checks to strengthen the data.