Overview

For decades, reducing infant mortality has been a long-standing challenge in the greater Cleveland metropolitan area. During 2015 alone, 155 babies in Cleveland’s Cuyahoga County died before reaching their first birthday, giving the county an infant mortality rate of 10.5 deaths per 1,000 live births—almost double the national rate. Even more alarming, the problem was concentrated among African-American families, where the infant mortality rate was three times that of Caucasian babies.

In response to this devastating crisis, leaders from every sector of the community – including the three largest health systems in Cleveland – convened in early 2016 to form First Year Cleveland (FYC). The mission of this collaboration is to align and mobilize the community through a unified, comprehensive and sustainable strategy to reduce infant deaths to 6 per 1,000 by 2020.

To that end, FYC formed 11 community-wide “action teams” that focus on issues such as bias in the health care workplace and the role of maternal stress on infant death. Through their specific focus, all 11 teams ultimately address FYC’s overarching, data-driven priorities: reducing racial disparities, extreme prematurity and sleep-related deaths.

Racial Disparities: African Americans make up 38 percent of births in Cuyahoga County but represent 69 percent of infant deaths. FYC works with community leaders to address disparities. “For example, one of our teams hosts roundtable discussions with African-American families who have experienced the loss of an infant,” says Rebecca Starck, M.D., FACOG, president of Avon Hospital; clinical assistant professor of Surgery at Cleveland Clinic Lerner College of Medicine, and an FYC board member. “We ask the parents to help us understand how the system failed them and what we could have done differently to support them.” FYC offers stress-related individual and group-based interventions for African-American pregnant mothers and for expectant fathers. FYC also is taking a leading role in supporting policies and research to determine the sources of disparities as an essential step to developing solutions.

Extreme Prematurity: For more than two decades, prematurity has been the largest contributing factor to infant mortality in Cuyahoga County. In 2015,
45 percent of all infant deaths in Cuyahoga County were extremely premature, at 23 weeks gestation or earlier. FYC has developed a culturally competent approach to discuss prematurity and the factors that contribute to premature birth. “We know that if babies reach 24 weeks gestation, their likelihood of survival significantly increases,” says Starck. “So we’re focusing on identifying women who are at risk for extreme premature birth and making sure that they receive the prenatal care they need to prevent that from happening.”

**Sleep-related Infant Deaths:** In Cuyahoga County, there were 27 infant deaths related to sleep in 2015. In many of those, the fatalities resulted from improper use of a crib, such as putting babies to bed with too many blankets and pillows. “We believe that there should be zero sleep-related deaths. Educating parents and family members about safe sleeping practices can achieve that,” says Starck. To address this, FYC offers behavior modification programs that use “sleep ambassadors” to host forums and workshops with parents. Community health workers also visit individual homes to help families create a safe sleep environment.

“Accessibility is a significant issue, so the interventions related to all three of our priorities are brought into the communities where the highest-risk patients are,” says Starck. “YMCAs, local schools, churches and community centers have provided FYC a convenient avenue for education and information sharing.”

**Impact**

The ultimate goal of FYC is to reduce the infant mortality rate in Cuyahoga County to 6 deaths per 1,000 births by 2020. When FYC was launched, the 2015 mortality rate was 10.5 infant deaths per 1,000 births. In 2018, that number was down to 8.3. Starck is hopeful that these encouraging results indicate that FYC will reach its initial goal by continuing to focus on racial disparities, extremely premature birth and sleep-related infant deaths.

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**Lessons Learned**

Understanding and then addressing the social determinants of health is a complex and multi-layered endeavor. Drawing on the work of other cities as well as its own initial work, FYC has learned the importance not only of collaboration with civic, health, volunteer and faith-based leaders, but also of grassroots efforts. “We use a bottom-up approach drawing on the experience and wisdom of frontline caregivers,” says Starck. “We know the importance of listening to community members, as well as the value of listening to each other. Having Cleveland’s three health systems work together and share best practices ensures that each of us is doing the best we can for our patients.”

**Future Goals**

With the 2020 goal within reach, FYC will focus on sustainability moving forward. One of FYC’s action teams is looking at the “Centering Pregnancy” model, in which women share medical appointments for prenatal care, and adapting it into “Centering Parenting.” “This would be a community-based care model where neighbors and community members are connected with one another in order to sustain what FYC has initiated,” says Starck. “While reaching our goals by reducing health disparities is our focus right now, we will need to maintain that momentum for the future.”

**Contact**

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