

American Public Health Association

Maternity Care Coalition
Strengthening families, one baby at a time

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What is MCC?

'MOMobiles' bring help to clients

Area organization targets low-income pregnant women, babies

Staff at the Maternity Care Coalition for pregnant women who need their facilities. MCC workers "doorstep" them.

Changing views of pregnancy

Seminar addresses importance of health of expecting women

MOMobile honored for job well done

Tribune Staff Report

For its innovative approach to improving access to prenatal care, the organization has earned a national award for its role in reducing infant mortality.



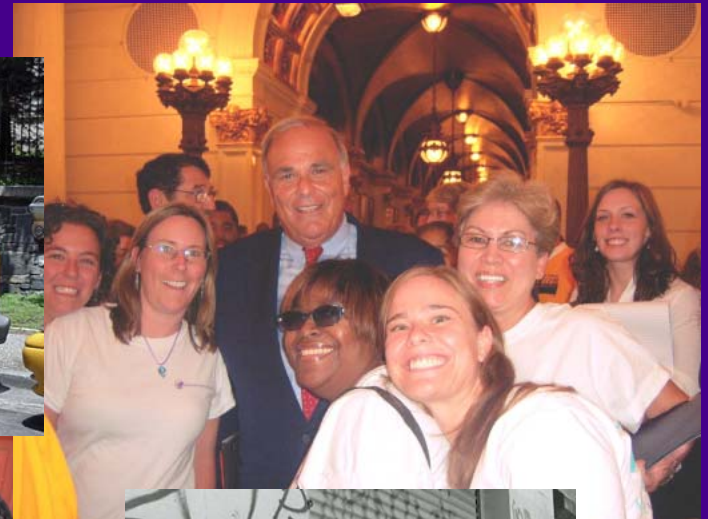
organization that focuses on reducing mortality and improving birth outcomes in the community. Over the past 41,000 families have been helped by the program.

High costs shrink

7 hospital units in the region have closed because of high premiums. Some fear losses will bring...

Grant program for family health

When you see a problem, attack it and put everything you have into solving it.





Maternity Care Coalition

DIVERSITY ▶

◀ ACCESS

▶ Childbirth at a *Crossroads*

> IN SOUTHEASTERN PENNSYLVANIA

CARE ▶

◀ EQUITY

SUPPORT ▶

Five Crossroads

- **Diversity:**

An increasingly diverse population meets a strained health care delivery complex.

- **Access:**

Many women lack access to adequate healthcare.

- **Care:**

Our region suffers a loss of practitioners and hospitals.

- **Equity:**

Healthcare inequities persist across the region.

- **Support:**

21st century medicine and culture shape the childbirth experience.

Design

- Interviewed more than 70 key informants.
- Held focus groups with consumers and professionals groups.
- Held two community forums.
- Interviewed individual families and pregnant women.
- Reviewed literature and analyzed data from local, state, and national sources.



- In 1 out of 10 homes in suburban counties, and 1 out of 5 homes in Philadelphia, the primary language is not English.
- 33% of statewide births and 28% of SE Pennsylvania births are to women on Medicaid.

Recommendations

- Practitioners who meet “National Standards for Culturally and Linguistically Appropriate Services in Health Care.”
- Healthcare facilities that provide services and signage in the predominate language(s) of their communities.
- Sufficient Healthcare providers to work with diverse pregnant women in all five counties.

- More than 1 in 10 women in Southeastern Pennsylvania ages 18-39 do not have health insurance.

Recommendations

- Expand healthcare coverage for the uninsured and under-insured.
- Improve current systems to facilitate easier access and improved services.

- There is a declining pool of practitioners—physicians, midwives, and nurses.
- Since 1997, 13 Southeastern Pennsylvania hospitals have discontinued obstetric care.
- The number of graduating United States medical students choosing obstetrics and gynecology as a specialty has dropped by almost 50% since 1980.
- Despite being the home of the premier nurse midwifery training program in the country, few graduates remain in this region. Only 4.5% of babies in our region are delivered by midwives, compared to 9.4% in PA and 9% nationally.

- Despite a steady birth rate of 50,000, 12 Obstetrical Units closed in last ten years, leaving only 8 still open within Philadelphia.
- 25% fewer maternity facilities since 1990 for the entire region of Southeastern PA.
- In 2005, about 7% of Pennsylvania practicing Obstetricians planned to stop within twelve months.

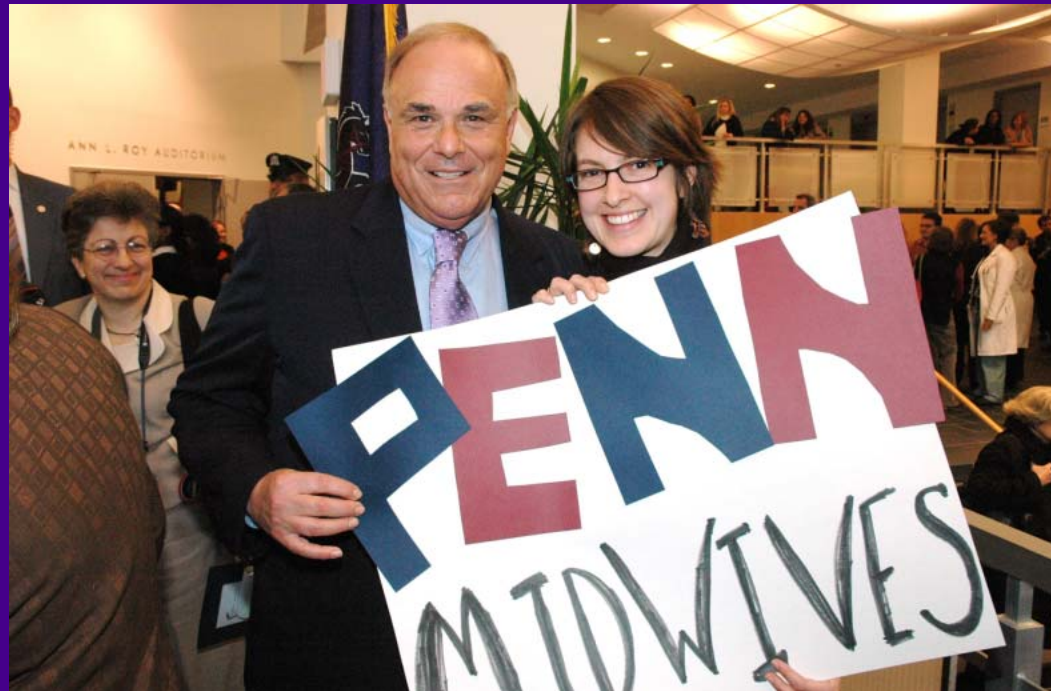
- About 40 practicing Midwives in Philadelphia, only about half doing deliveries. They do between 15%-25% of all deliveries.
- 225-230 practicing Midwives in Pennsylvania doing about 10% of all the births. Some rural counties are much higher at almost 30-50%.
- Statewide, midwives deliver about 12,000 babies annually.

Recommendations

- Maternal/child health policy based on sound data.
- A change in the climate that surrounds medical malpractice and obstetrics.
- Regional support of efforts to increase the supply of childbirth practitioners and providers, especially those interested in serving low-income or minority women.
- An improved work environment for current practitioners.

Recent Advancements in Legislation

- Prescriptive authority bill signed into law on July 20th, 2007 making Pennsylvania the last state in the nation to give midwives the legal ability to prescribe medicine to their patients.



- African-American infants in Southeastern PA are more than twice as likely to die in their first year of life as white infants.
- African-American mothers are four times as likely to have a childbirth related death as white mothers in Pennsylvania.
- Philadelphia is tenth among the ten largest U.S. cities in breastfeeding initiation rates.

Recommendations

- The Commonwealth of PA establishes an Office of Health Equity to begin to address these inequities.
- Establish the CDC Pregnancy Risk Assessment Monitoring System (PRAMS) to begin to track pregnancy related outcomes.
- An annual health “report card” issued by each county showing results for each racial grouping.

- Time constraints and care fragmentation have weakened the bond between a pregnant woman and her practitioner.
- The majority of pregnancies and births are healthy events, but the majority of women have technology-intensive births.
- Cesarean section rates are at an all time high.
- Breastfeeding is still not the norm in our culture. Rather, it must be actively chosen.

Recommendations

- A full range of “high tech and high touch” options, following the best medical evidence about safety and effectiveness, available to all women.
- Public and private sector policies that recognize the importance of time for parental leave, flexible work schedules, and other family-friendly practices.
- An improved local environment for breastfeeding mothers and babies.

Findings

- The travelers along the childbearing road form a very diverse population, who often hit road blocks as they navigate today's strained healthcare system.
- Access to adequate healthcare, beginning before conception, through pregnancy, and continuing post-partum, remains elusive for many women in our area.
- A declining pool of practitioners – physicians, midwives, and nurses – is vulnerable to malpractice suits and faced with a healthcare system that has found maternity care unprofitable.
- Marked healthcare inequities still exist across the region.
- Women's active participation in defining their birth experience has declined.

Translating Recommendations into Actions

- Who has the authority and responsibility for funding, regulating and delivering service?





Capturing the Media

- Opportunities in the environment

Health & Science

MONDAY, AUGUST 20, 2007 8 • The Philadelphia Inquirer

Advocates of breast feeding try to boost the city's low rate of nursing.

Talish Walton was surprised that the hospital had formula to feed her newborn before she nursed him.



DAVID GOODMAN/Inquirer Staff

Got mother's mill

Talish Walton entered the delivery room at Hahnemann University Hospital last month saying she planned to breast-feed. But when her son was born, she said, the hospital staff took him and fed him formula

anyway. "I wasn't sure," she said. "I was a little bit nervous about the formula. I was a little bit nervous about the formula."



BARBARA L. JONSTON/Inquirer Staff Photographer

THE DAILY VIEWS

THE MATERNITY-WARD BLUES

THE EPIDEMIC OF CLOSURES HERE NEEDS SOME GOOD, HARD THINKING

SCORES OF PHILADELPHIANS — many in Stuglis and strollers — rallied outside Chestnut Hill Hospital yesterday, dismayed that the hospital is contemplating closing its obstetrics unit.

If that happens, Chestnut Hill, which delivers 1,200 babies a year, would be the 15th hospital in southeastern Pennsylvania to stop delivering babies, the third in a year, part of a growing crisis. Frankford Hospital-Terrasetale closed its maternity ward in June. Jeanes Hospital absorbed many of those deliveries, then announced in February that it will close its obstetrics unit on May 30.

The thousands of pregnant women who would have delivered at those hospitals will have to find other places to have their babies, and those hospitals in turn will find themselves overcrowded and under-compensated for the care they provide. It's a cascading effect that endangers both babies and their mothers as fewer receive pre-natal and post-partum care.

A report by the Maternity Care Coalition last year described a situation that followed the closing of an obstetrics unit. One hospital nearby had so

many births, it was without incubators for newborn babies while, three miles away, many incubators were empty in the closed facility.

With fewer obstetrics units, even more obstetrician-gynecologists will abandon the region: Since 2001, according to the Pennsylvania Department of Health, nearly a third of the area's ob-gyns have left or stopped practicing obstetrics. The loss of these doctors could affect the health of many other women, since ob-gyns often are the only doctors many women see for cancer screenings and general health care.

There's a crisis in the maternity "business" in large part because health care is run like a business, subject to "market dynamics" rather than to the needs of the community.

In obstetrics, the law of supply and demand is turned inside out. While the demand essentially has stayed the same — about 50,000 babies are born each year in the region — the supply of maternity beds continues to go down and down.

There are at least 260 fewer maternity beds in southeastern Pennsylvania than there were 10 years ago, according to the Delaware Valley Hospital Council.

Delivering babies is nowhere near as profitable

The birth of a big problem

Fewer spots in Philadelphia to have a baby

MIKE BENNER



DAILY NEWS

As Hahnemann will face increased pressure to deal with rising deliveries.

to give are run-ty," said ic policy nity Care nization women's lth care.

"There are less childbirth practitioners now than before, both obstetricians and midwives. "Hospitals have decided maternity care is not as profitable as other specialties," said Thall, adding, "That is a major problem

for physicians who take the Hippocratic Oath." Given the recent closings of Jeanes and Frankford hospitals, the city's decrease in maternity beds doesn't seem like a problem that will be solved anytime soon.

FRIDAY, APRIL 6, 2007

PHILADELPHIA DAILY NEWS

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Childbirth at a Crisis

NORTHEAST TIMES

PHILADELPHIA

NEWSWEEKLY

25¢

NORTHEAST PHILADELPHIA'S PREMIER COMMUNITY NEWSPAPER

ZONE 4 • THURSDAY, MARCH 15, 2007

MOMobile staff fears turn taken by maternity units

By Diane Villano
Times Staff Writer

Staffers with the MOMobile program at the Northeast's District 10 Health Center fear that clients could be in for a bumpy ride when delivering their babies now that Jeunes Hospital will close its maternity unit on May 31.

Two weeks ago, the Temple University Health System, which claims Jeunes as part of its health-care network, announced that budget cuts resulted in the decision to eliminate the Fox Chase hospital's Maternal and Child Health Program.

Since 1997, 14 hospitals in the Philadelphia area have closed their obstet-

rics units, according to the health center program.

"The resources are drying up right in front of us for pregnant and parenting women," said MOMobile program director Arnetta Stewart.

Locally, the program operates out of the city's District 10 Health Center at Cottman and Bustleton avenues.

Last year, the non-profit Maternity Care Coalition, which provides the MOMobile as part of its outreach efforts, published a report of its study of the state of childbirth opinions and care "in Southeastern Pennsylvania."

In the preface to the report, MCC ex-

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MOM

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utive director JoAnne Fischer stated, "While it may be premature to say that we are in a health-care crisis for childbearing families, we are indeed at a crossroads."

In this region, the planned May 31 shutdown of Jeunes' OB unit has changed all that, said Letty Thall.

"We are no longer at a crossroads. It's a crisis," said Thall, MCC's director of research, education and advocacy, during an interview in the Northeast Philadelphia MOMobile office.

MCC is a non-profit organization that seeks to improve maternal and child health and well-being, with outreach primarily in high-risk neighborhoods and advocacy at the local, state and national levels.

The MOMobile is its signature program, relying on vans to visit neighborhoods to deliver support and resources to pregnant women, new parents, infants and their families in eight areas of Southeastern Pennsylvania, including Philadelphia and sections of Montgomery and Delaware counties. Some of those services include providing links to prenatal

It was a busy year . . .

Since 1980, more than 60,000 families have been served by the nine MOMobile locations throughout the Philadelphia area.

MOMobile 2006 Report Card

- 40,840 interventions to educate families
- 4,338 families served
- 3,636 deliveries of supplies
- 2,061 calls to Crisis for Kids hot line
- 2,059 clients participated in Sleep education
- 1,800 clients participated in Parenting Outreach meetings
- 964 new families were enrolled
- 480 children received holiday gifts

care, pediatric and women's health care, behavioral health services, nutrition program, education and other community resources.

"You may never need us, but it's always

good to have that safety net," Stewart said.

The Northeast MOMobile and its 400 to 500 clients, most with limited means, will be directly impacted by the end of maternity services at Jeunes, MCC officials say.

The majority of women seen at the health center take SEPTA and would find it difficult to make their way to suburban hospitals, even if they weren't in labor at the time, the coalition contends.

Not all of the hospitals accept Keystone Mercy Health Plan, the Medicaid-managed care provider. For example, Lower Bucks Hospital and Abington Memorial Hospital accept Keystone Mercy, but Holy Redeemer does not. According to Holy Redeemer spokeswoman Cassie Ryan, maternity services are available to medical-assistance patients through Health Partners.

Stewart, the MOMobile director, said the majority of women she sees are immigrants and often are without any insurance. Without documentation, only emergency insurance is available for routine deliveries. There is no coverage for anything beyond that, such as complications because of diabetes, she said.

"If they use the health center, we can register them for the emergency insurance," Stewart said.

She and others with the Maternity Care Coalition are highly concerned about the future of obstetrical care, especially as hospitals bend to financial pressures or opt to funnel resources to other key areas of medical care.

According to Thall, MCC has been in communication with Philadelphia City Council, state representatives, U.S. Rep. Albyon Schwartz and members of Gov. Ed Rendell's cabinet to direct their attention to the dilemma.

"Nobody is totally responsible, but everybody has a piece of it," she said.

"There is not one single answer." *
A copy of the MCC report can be found at <http://www.momobile.org/ChildbirthatCrisis.html>



Impact of Crisis

- Opportunities for leadership and recognition



Victories and Challenges

- **Local**
 - Mayoral candidates
 - City Council
- **State**
 - Executive Branch
 - Legislature





For more information go to www.MOMobile.org

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Maternity Care Coalition

Strengthening families, one baby at a time

Highlights...



The mission of Maternity Care Coalition is to improve maternal and child health and wellbeing through the collaborative efforts of individuals, families, providers and communities.



Maternity Care Coalition's 2006 "Family Album" Annual Report is now available online. [Click here to download.](#)



Support MCC's annual appeal through June 30 and we'll send this beautiful card to each special woman you designate.... [Click here for more details.](#)



United Way
MCC Donor Choice #06427

It's UNITED WAY Time

When you make your donor-choice designation, remember the families served by Maternity Care Coalition and the MOMobile. Since its inception in 1989, MCC's signature MOMobile program has helped more than 63,000 families. [Donor Choice #06427](#)



Volunteers from Independence Blue Cross sorting donations during Day of Caring 2006 at MCC.

UNITED WAY Day of Caring

On September 19th, MCC will once again participate in this annual event uniting corporate and community volunteers in service projects at local non-profits. This year we will be hosting volunteers from PA Lumbermens Mutual Insurance Company and the Jewish Federation of Greater Philadelphia for a day of projects at our main office and seven of our sites.



Click icon to view now.

Childbirth at a Crossroads

On May 31, 2007 Jeane's Hospital became the 14th hospital in a decade to close its obstetrics services. Learn how [reduced obstetrical access](#) impacts our region. [Click here](#) for more information on the press conference and report



[Pregnant? We Can Help...](#)

NEWS ALERT!
Important Information regarding crib recall



[Cribs for Kids](#)
Putting babies to sleep safely...



[Early Head Start MOMobile](#)
Building a Foundation for Learning - From Pregnancy to Age 3...

[Click here to visit MCC's Breastfeeding Website](#)

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