

Health Advocacy in Pregnancy and Infancy (HAPI): Needs Assessment for Creating Patient-Centered, Community-Engaged Programs for Pregnant Homeless Women



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Introduction

- ‡ The infant mortality rate (IMR) was 9.1/1000 live births, compared to the national average IMR of 5.87/1000 live births.^{1,2}
- ‡ The leading cause of deaths was prematurity.³
- ‡ Homelessness during pregnancy is correlated with a higher risk of premature births resulting in poorer birth outcomes.⁴

Purpose

- ‡ Identify, via a needs assessment, the unmet needs in maternal and perinatal health of homeless women currently living at a shelter in Milwaukee, WI.
- ‡ Inform the development of patient centered service-learning modules, known as HAPI.
- ‡ Impact the future health of participating homeless pregnant women, as well as the future service of participating medical students.

Methods

- ‡ Two 1 hour focus groups were held
- ‡ A total of 13 shelter residents, 4 students, and 1 physician participated in each session.
- ‡ Open- and close-ended questions prompted discussion on challenges, strengths, and needs of homeless pregnant women.
- ‡ Documented responses were analyzed in order of frequency.

Results

‡ 13 themes were identified as unmet needs for homeless pregnant women: the 5 most frequently identified themes are shown below



Figure 1. The top 5 identified themes for improving pre- and postnatal experiences for homeless pregnant women. Examples of concepts discussed are shown within each theme.

Conclusions and Future Steps

This needs assessment found unmet maternal and perinatal needs in this local homeless pregnant population, some of which can be addressed through the development of HAPI.

- 5 and implementation of the HAPI service-
- ‡ Breast feeding and
- ‡ Infant care: Safe sleep, common rashes and illnesses, child development, well-
- ‡ Postpartum depression and stress
- 2) Student & Mother Partnership Program
 - ‡ Students providing pre/postnatal health
- 3) Data collection on birth outcomes
 - ‡ Dissemination of findings

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References

- 1) Baker, B, Barrett, T, Rotar, S. City of Milwaukee 2016 Infant Mortality Rate (IMR): Data Brief, Milwaukee, WI: City of Milwaukee Health Department. May 2017.
- 2) Kochanek KD, Murphy SL, Xu JQ, Arias E. Mortality in the United States, 2016. NCHS Data Brief, no 293. Hyattsville, MD: National Center for Health Statistics. 2017.
- 3) Ngui, E, Michalski, K, LeCounte, E, Mohr, A. 2017 City of Milwaukee Fetal Infant Mortality Review Report. Milwaukee Health Department and Joseph J Zilber School of Public Health, April 2017.
- 4) Cutts, D.B., Coleman, S., Black, M.M., Chilton, M.M., Cook, J.T., de Cuba, S. E., et al. (2015). Homelessness during pregnancy: A unique, time-dependent risk factor of birth outcomes Maternal and Child Health Journal, 19(6), 1276-12-83.