

SISTERS UNITED: Promoting Healthy Habits, Protecting Our Babies

An Innovation Station Emerging Practice

Purpose: This document is intended to support MCH professionals to implement a practice found in Innovation Station. This resource provides the information needed to replicate the practice and is divided into two sections: the first section provides a high-level overview of the practice while the second section describes how to implement the practice. For additional information on any of the content provided below, please reach out to the practice contact located at the bottom of this document.

Section I: Practice Overview

Location:	Arkansas	Title V/MCH Block Grant Measures Addressed
Category:	Emerging	Percent of infants who were ever breastfed Percent of infants breastfed exclusively through 6 months
Date Submitted:	October 2017	Percent of infants placed to sleep on their backs

Practice Description

SISTERS UNITED is a culturally sensitive, community-based initiative designed to increase public awareness about the burden of infant mortality, associated risk factors, and how to prevent these deaths. This campaign is the first time the four African American sororities of the National Pan-Hellenic Council have taken up an issue collectively.

Purpose

SISTERS UNITED was created to address each contributing factor of infant mortality in the African American community. Specifically, in looking at infant mortality among African Americans, The Office of Minority Health and Health Disparity (OMHHD) initially looked at six areas of focus. They were low birth rate, birth defects, immunization rates during pregnancy, SIDS, breastfeeding and tobacco use. Prematurity and low birth rate were the leading cause of African American's death in the first month of life which is almost entirely due to them having three times the rate of premature deliveries before 28 weeks compared to other races. In terms of birth defects, they are the second leading cause of African American death's in the first year of life. About 1 in every 33 babies is born with a birth defect with most occurring in the first 3 months of pregnancy. When looking at immunization rates during pregnancy, an annual flu shot can decrease the chance of the mother and baby dying from the flu by 50%. It can also decrease the chance of them getting the flu and the mother having a premature delivery by 70%. However, in 2010 only 40% of pregnant African American mothers received the flu shot compared to 69% of Latinos' and 66% of White women. In Arkansas, once an infant reaches one month of age, the most common cause of death is sudden infant death

syndrome (SIDS). Always putting a baby to sleep on their back decreases SIDS by 50%, yet only 33% of Black mothers practiced safe sleep, compared to 67% of White mothers who reported that they always put their babies to sleep on their backs. Data in Arkansas also showed that African American women had the lowest breastfeeding rate compared to Whites and Latinos.

PROGRAM OBJECTIVES

- By December 31, 2020, the SISTERS UNITED Campaign will increase awareness of the causes of infant mortality to 80% among sorority members.
- By December 31, 2020, the SISTERS UNITED Campaign will increase the percentage of African American women attending safety baby showers by 50%.
- By December 31, 2020, the SISTERS UNITED Campaign will increase the percentage of African Americans attending safety baby showers who follow safe sleep practices by 50%.
- By December 31, 2020, the SISTERS UNITED Campaign will increase the percentage of African American pregnant women attending safety baby showers who receive an annual flu shot by 50%.
- By December 31, 2020, the SISTERS UNITED Campaign will increase the percentage of African American pregnant women attending safety baby showers who breastfeed exclusively for six months by 50%.

Practice Foundation

The rationale for our practice is the Information Processing Theory. A train-the-trainer conference was held and each sorority president was charged with recruiting two to three members from their chapters to attend and become trainers for their respective chapter and the community at large. Trainings focused on preventive measures that directly correlate with the leading causes of infant death. These measures include taking folic acid, getting a flu shot during pregnancy, breastfeeding, and following safe sleep practices. Those chosen to be trainers are effective communicators, well-respected members of their communities, and already had a foundation of trust with the target population.

Core Components

Core components are those essential practice elements which are observable and measurable.

- *Example: The goal of our program was to improve the number of perinatal depression screens among OB/GYN providers. We did this by conducting a yearlong practice improvement program for OBGYN practices across the state. The core components of this program included virtual training by a nurse educator, provision of a referral sheet tailored to the local area for positive screened women, and follow-up with practices by our program manager.*

SISTERS UNITED was created to address each contributing factor of infant mortality in the African American community. Our trainers are responsible for presenting 10-minute health education based “mini-trainings” at monthly sorority meetings. The purpose of these mini-

trainings is to provide information and education about a single preventive measure—such as safe sleep practices—and help members become comfortable sharing what they learn. Because SISTERS UNITED largely relies on its members to get the message out, ADH purchased flash drives and binders for the sorority members who lead trainings for each chapter. A series of YouTube videos - which feature prominent African-American women health professionals who also belong to one of the SISTERS UNITED sororities- were uploaded onto each flash drive along with various health education materials and talking points. Sorority members complete pre- and post-tests before and after completing the trainings and they are used to measure their comprehension of the educational topic being presented. SISTERS UNITED social media pages (Facebook and Twitter) are also used as communication tools to help bring attention the message out to the communities.

Practice Activities

Core Component	Activities	Operational Details
Assessment	Pre/Post Test to measure their knowledge before and after each training	Increase awareness of infant mortality by holding an infant mortality training conference for individuals in these organizations.
Dissemination	Conference Presentations, Mocha Interactive Webcast, Safety Baby Showers	Annual abstract submissions. Sorority Chapter conducting Safety Baby Showers, Monthly Breastfeeding Interactive Webcast

Evidence of Effectiveness (e.g. Evaluation Data)

2013 Demographic Analysis

- There were 987 participants in the 2013 community survey.
 - Of those, 92.2 % were female and 7.8% were male.
 - The vast majority of the participants were Black (88.1%), with much smaller percentages of White (6.1%), Hispanic (3.6%), Asian/Pacific Islander (1.0%), Multi-Race (0.8%), and Native American (0.4%).
 - The majority of the participants were among the 18-24 year old and 35-44 year old age groups with 21.4% and 20.4%, respectively.
 - 25-34 year olds and 55-64 year olds represented the next largest age groups with 14.5% and 14.6%, respectively.
 - The remaining age groups represented were 65 and over (10.2%), <18 (9.5%) and 45-54 (9.4%).
 - A look at educational status shows that 60.1% of the participants were college graduates, followed by some college (19.8%), high school graduate (11.9%) and less than high school (8.2%).
 - Over fifty percent of the participants (52.9%) did not have children in the household.

The demographic analysis reveals that for 2013 the short-term goal as well as the project objective was achieved.

2013 Pre & Post Survey Results

- In 2013, there were twenty-three pre and post survey questions.
 - 231 surveys were in all four focus areas.
 - Of the remaining surveys, there were 114 Breastfeeding, 140 Flu shot, 222 Folic Acid and 263 Safe Sleep.
 - It would appear that question (2) “The flu can cause a very mild illness in a pregnant woman” was an issue for respondents as only 29.1% answered it correctly in the pre-test and 25.6% answered it correctly in the post- test.
 - The largest positive change was in question (5) “A flu shot during pregnancy can protect an unborn baby” as there was a 25.9 point increase in the percentage of correct responses.
 - This change was statistically significant.
 - The largest negative change was in question (11) “Folic acid should be taken by a pregnant woman before and during the pregnancy” as there was a 38.4 point decrease in the percentage of correct responses. However, this change was not statistically significant.

2014 Demographic Analysis

- There were 287 participants in the 2014 community survey.
 - Of those, 92.6 % were female and 7.4% were male.
 - The vast majority of the participants were Black (89.4%), with much smaller percentages of White (3.5%), Hispanic (3.9%), Native Am (1.8%), Multi-Race (1.1%) and Asian/Pacific Is (0.4%).
 - The majority of the participants were among the 25-34 year old and 35-44 year old age groups with 25.2% and 23.4%, respectively.
 - The next three largest age groups were 45-54 year olds (15.7%), 55-64 year olds (14.2%) and 65 and older (12.4%).
 - The remaining age groups represented were 18-24 (6.2%) and <18 (2.9%).
 - A look at educational status shows that 67.0% of the participants were college graduates, followed by some college (19.2%), high school graduate (6.7%) and less than high school (7.1%).
 - Over seventy percent of the participants (72.3%) did not have children in the household.

The 2014 demographic analysis reveals that the short-term goal as well as the project objective was achieved.

2014 Pre & Post Survey Results

- In 2014, there were thirteen pre and post survey questions.
 - 165 surveys were in all four focus areas.
 - Of the remaining surveys, there were 0 Breastfeeding, 6 Flu shot, 66 Folic Acid and 50 Safe Sleep.
 - The largest positive change was in question (9) “A BREASTFED baby is less likely to die of SIDS” as there was a 25.5 point increase in the percentage of correct responses. This change was statistically significant.
 - The only negative change was in question (12) “Babies are likely to choke if they SLEEP on their back” with a 4.1 point decrease in the percentage of correct responses. However, this change was not statistically significant.
 - There was also a 4.1 point decrease in question (7) “BREASTFED babies are more likely to get sick.” However, this question is unreliable as it was found that the pre- and post-test questions were worded differently on the survey.

Replication

PEER REVIEW & REPLICATION

Smith, M. R., PhD, MPH, Sharma, R., MSPH, & Grimes, D., MD, MPH. (2014) [Reducing Infant Mortality in Arkansas: A Grassroots Initiative Utilizing African American Sororities in Arkansas.](#) *Journal of Arkansas Medical Society.*

The SISTERS UNITED Initiative has been replicated in the following ways:

Families United Campaign (funded by ASTHO/UHF):

ADH Office of Minority Health & Health Disparities used SISTERS UNITED framework including infrastructure, intervention and evaluation methods to educate Latino women receiving prenatal services at ADH maternity clinics in Northwest Arkansas. Similar educational video modules were developed in English and Spanish languages and made available to the trainers and public at the links below:

[Introduction to Families United Gestational Diabetes Management](#)

[Importance of Folic Acid Use](#)

[Importance of Flu Shot during Pregnancy](#)

[Importance of Breastfeeding](#)

[Safe Sleep Position & Location for the Baby](#)

BROTHERS UNITED Initiative

BROTHERS UNITED is a community-based initiative designed to increase public awareness and promote healthy behaviors aimed at reducing infant mortality among African Americans. The initiative is a partnership among African American fraternity chapter members of Alpha Phi Alpha, Kappa Alpha Psi, Omega Psi Phi, Phi Beta Sigma and Iota Phi Theta. This campaign is the first time the four African-American fraternities of the National Pan-Hellenic Council have taken up an issue collectively. The following educational videos were developed:

[Overview of BROTHERS UNITED](#)

[Breastfeeding](#)

[Safe Sleep](#)

Mississippi SISTERS UNITED Project

The Mississippi Sisters United project is a partnership between the Mississippi State Department of Health Office of Health Disparity Elimination and the National Pan-Hellenic graduate sorority chapters of Mississippi. Mississippi Sisters United is modeled after an initiative started by the Arkansas Department of Health designed to help educate and empower the African-American community to reduce the state's infant mortality rate.

[Mississippi SISTERS UNITED Impact video](#)

Section II: Practice Implementation

Internal Capacity

Dr. Smith currently serves as the Director of the OMHHD. Her duties as director include: Assisting with establishing policy and procedures to aid in the elimination of ethnic and racial

disparities; Responsible for ensuring that programs and services are delivered in a culturally sensitive manner by the Arkansas Department of Health.

Program Health Specialist – Shakia Jackson

Ms. Jackson works under supervision of the Director and is the lead program specialist responsible for the program management and oversight of the SISTERS UNITED Program. She is responsible for the day-to-day activities and ensuring the work plan is executed as implemented.

Epidemiologist – Joyce Biddle

Ms. Biddle works under the supervision of the Director and coordinates data collection and analysis. She is responsible for leading and coordinating the evaluations component of SISTERS UNITED including power analysis to assist in the planning of the interventions.

Trainers

Members of the sororities who were trained to conduct presentations on SISTERS UNITED focus areas to members of their community

Collaboration/Partners

The OMHHD formed the first SISTERS UNITED chapter, in collaboration with the Family Health Branch of the Arkansas Department of Health, March of Dimes, and Children’s Hospital. To accomplish this, the following steps were taken in chronological order:

- The OMHHD received a \$6,000 grant from ADH in 2012 to administer the Sisters United campaign, while the Family Health Branch provided staff time to help with the effort. The Arkansas Children’s Hospital also assisted by donating staff time and expertise to develop train-the-trainer programs and train the sorority members.
- ADH launched Sisters United in 2012. During the early stages of the planning process, OMHHD relied heavily on personal connections to get the program going and leveraged the fact that some staff members were also sorority members
- In June 2012, OMHHD brought together the presidents of each sorority’s graduate chapters, shared data on the burden of infant mortality, and described the role that the sororities could play in educating other African-American women about preventive activities. The sorority leaders were receptive to the message and spurred to action.
- In February 2013, ADH held a train-the-trainer conference. The sorority presidents each recruited two to three members from their chapters to attend and become trainers for the rest of the chapter and the community at large. Trainings focused on preventive measures that directly correlate with the leading causes of infant death. These are simple behavior changes for mothers and caregivers that go a long way toward protecting infant health. Practices include taking folic acid, getting a flu shot during pregnancy, breastfeeding, and following safe sleep practices. Those chosen to be trainers are effective communicators, well-respected members of their communities, and already had a foundation of trust with the target population. These trainers are also responsible for presenting 10-minute “mini-trainings” at monthly sorority meetings. The purpose of these short lessons is to provide information about a single preventive measure—such as safe sleep practices—and help members become comfortable sharing what they learn. Sorority members complete pre- and post-tests before and after completing the trainings. Because Sisters United largely relies on its members to get the

message out, ADH purchased flash drives and binders for the sorority members who lead trainings for each chapter. A series of You Tube videos, available on the Sisters United Facebook page, feature prominent health professionals who also are African-American women, most of whom belong to one of the Sisters United sororities. The health professionals talk about what women can do to reduce their risk of delivering prematurely and how to create a safe sleep environment after the baby arrives. The videos were designed to reach African-American women, but are relevant for all pregnant women or individuals caring for children.

- In an effort to help the cause, an African-American-owned art gallery donated the space to hold a press conference to launch the campaign. A local African-American artist designed the [campaign's logo](#) for free and donated other art to the cause.
- Every sorority chapter is encouraged to be creative and tailor their educational efforts to their communities. Chapter activities include: hosting candlelight vigils for the babies who died before their first birthdays; sponsoring public service announcements; radio interviews on the Sisters United topics; and incorporating the message into annual health fairs they sponsor in the community.
- Several chapters explored ways to involve men in an effort to share information about the risks, protective factors, and how they could reinforce the messages within their families, as a result Brothers United was developed in 2016 which is a partnership Alpha Phi Alpha, Kappa Alpha Psi, Omega Psi Phi, Phi Beta Sigma and Iota Phi Theta, where their focus areas are breastfeeding and safe sleep.

Practice Cost

Budget			
Activity/Item	Brief Description	Quantity	Total
Equipment: Pack n' plays	Pack n' Play- Used to support a safe sleep environment	60	\$3,200
Conference Materials:	Banners: 2	2	\$1,300
	Name Badges: 80	80	
	Safe Sleep Magnets 60	60	
	Onesies 60	60	
Office Supplies	Programs, Binders, Pens, Certificates, Stationery	80	\$2,000
Training Video	Informational vides developed by the Arkansas Department of Health	1	\$1,000
Food	Healthy boxed lunches were served during the training	80	\$500
Total Amount:			\$8,000

Practice Timeline

Practice Timeline				
Phase	Description of Activity	Date/Timeframe	# of hours needed to complete/oversee activity	Person(s) Responsible
Planning/ Pre-implementation	Recruit key members from the ADH centers and branches to form a working committee	2012		OMHHD
	Identify & Recruit African-American graduate sorority chapter presidents	June 2012		OMHHD
Implementation	Host Train the Trainers Conference	February 2013	8hrs	OMHHD
	Provided education to the community	March 2013		Individual chapters
	Host Safe Sleep baby showers	March 2013		Individual chapters
Sustainability	Our office encourages each SISTERS UNITED chapter to apply for state and federal grants			OMHHD

Resources Provided

Several resources are available from the campaign, including YouTube videos:

- SIDS: <http://www.youtube.com/watch?v=wfudqfhjVgs>
- Flu Shot: <http://www.youtube.com/watch?v=MAiLaNgarb4>
- Breastfeeding: <http://www.youtube.com/watch?v=PIAycz8DYJk&feature=plcp>
- Folic Acid: <https://www.youtube.com/watch?v=f0Nxhsx9lok>

Other dissemination resources include:

- SISTERS UNITED Brochures
- Educational Materials
- PowerPoint Presentation
- Discussion Topics
- Social Media (Facebook: [facebook.com/arsistersunited](https://www.facebook.com/arsistersunited); Twitter: [@ARSistersUnited](https://twitter.com/ARSistersUnited))

Lessons Learned

Assets

Partnerships with:

- African American sororities that organize local community events
- The Epidemiology and Health Statistics Branches at the Arkansas Department of Health provide data through Vital statistics and PRAMS used to measure changes in infant mortality as well as other behavior modifications such as changes in breastfeeding, flu shots, and folic acid use.

Challenges

- Getting buy-in from some graduate sorority members
- Recruiting pregnant women to participate in the safety baby showers
- Respondents not fully understanding questions on survey

Overcoming Challenges

- Increasing awareness and benefits of the campaign through social media platforms
- Engaging local health providers to refer pregnant patients to the safety baby showers
- Revising survey questions to make it simpler for respondents to understand

Lessons to Share

- Implementation of new public health services in these times of funding scarcity requires proof of health benefit and cost savings
- The use of a set of interventions that is coordinated and mutually supportive to bring education and awareness to communities about infant mortality

Next Steps

- Continue infant mortality education through monthly safety baby showers in local communities.
- Provide annual updates and training on infant mortality for sorority members.

Practice Contact Information

For more information about this practice, please contact:

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