# Delaware Thrives Logo

# DELAWARE HEALTH MOTHER AND INFANT CONSORTIUM (DHMIC)

## **Social Determinants of Health Advisory Workgroup**

Delaware Technical & Community College-Terry Campus

Education & Technology Building 700

Wednesday, March 4, 2020 9:00am to 10:20am

**Minutes**

**Attendees:** Karen McGloughlin (DPH), Cassandra Davis (DPH), Lisa Henry (DPH), Kristen Rios (DPH), Laura Saperstein (DPH), Mawuna Gardesey (DPH), A. Richardson (DHMIC DESU), Rich Parson (REACH Riverside), Paulina Gyan (DPH), Erin Knight (UD), Lucy Luta (DPH), Vik Vishnubhakta (Forward Consultants), Meghann Karasic (CLASI), Emily Haaskatzen (CCHS), Logan Herring (REACH Riverside), Cynthia Guy (CCHS Brandywine Women’s Health) Joan Kelley (CDRC/FIMR), Devon Manning (DHWIC), Lisa Oglesby (CC-DWH), Rita Landgraf (Co-Chair SDoH Workgroup) and Rep. Melissa Minor Brown (Co-Chair SDoH Workgroup).

**Staffing:** Liddy Garcia-Bunuel, HMA and Ana Bueno (HMA)

**Guest Presenter:** Stephen Medraux

Liddy Garcia-Bunuel from HMA welcomed members and introduced Rita Landgraf and Rep. Minor Brown as co-chairs to lead the meeting. Rep. Minor Brown introduced guest presented Stephen Medraux, Director of the Center for Community Research & Service and Associate Professor at the Biden School of Public Policy & Administration at the University of Delaware. His main research interest has focused on Homelessness and housing and he presented his work with Healthy Beginnings at Home (HBAH) program in Columbus, OH which provides transitional housing services for up to a year to pregnant, homeless women, their newborn infants, and other family members to prevent infant mortality. Stephen emphasized the importance of addressing social determinants of health when working to prevent mother and infant mortality and how housing adds stress to pregnant women.

Stephen Medraux indicated that based on his research that there are approximately 1,000 individuals and families experiencing homelessness, 250 are homeless families and most of them are single women with children. Stephen addressed how housing affects pregnancy as follows: Increased likelihood of scant prenatal care, Increased likelihood of co-morbidities affecting pregnancy, Increased risk of preterm birth, Increased risk of neonatal mortality and Frequent experiences of maltreatment / distrust of the medical system.

Stephen Medraux presented the Healthy Beginning at Home Program based in Columbus, Ohio which is a Pilot program (part of “Celebrate One” initiative to reduce infant mortality and premature births in Columbus, OH. The program aims to serve 50 pregnant women and new mothers and their households with the main goals to improve maternal and infant health outcomes and housing stability. The program aids with up to 2 years monitoring that there is stable housing upon program completion. Currently the program has captured the demographics and data of the participants showing the following:

* 87% identified as black; 79% under age 30
* 63% accompanied by other children; 16% by other adults
* 81% of women reported at least one prior pregnancy,
* all indicated prior poor birth outcomes
* 45% reported a previous diagnosis of depression
* 51% experienced extended periods of homelessness
* 41% experienced at least one eviction (24% multiple)
* 62% and 54% had electric and gas arrears, respectively
* 92% with credit score under 580 (bad/poor) or had no score
* 73% with income under $1000/month (46% w/ zero income)
* 44% with a prior criminal history
* 41% reported working or being on leave

The HBAH program provides housing vouchers, case management and wrap around services targeting high risk populations. The program established a control group to compare the results of the program having women that participated in the program compared to a group that did not participate in the program after the two years to see the results and the impact of the program.

Stephen Medraux mentioned the importance of addressing broader issues using a Housing First approach and combining a housing such as the Healthy Beginnings at Home Program with prevention, diversion and rapid rehousing initiatives. It is important for participants to have access to pre/post-natal care and other health care services, consider racial discrimination, affordable housing, eviction, education and vocational training as brother issues impacting maternal and child health outcomes.

Stephen Medraux also mentioned that a successful program must incorporate prevention, diversion and rapid rehousing. Eviction rates are very high, and it is an issue to address as well. Education and vocational training, and looking at data hot spots eviction, homeless data and where people were last housed before getting housing assistance as well as corrections and public health data is also important.

Laura Saperstein asked Stephen on the definition he used under extensive homelessness. Stephen Medraux indicated that under the program an individual is considered homeless when he/she has no home for longer than 90 days.

Mawuna Gardesey asked under best of circumstances if they can’t follow up do, they get thrown out of the program. Stephen Medraux indicated that that is based on a case by case basis. Typical experience is unusual 85% benchmark of retention of housing.

Paulina Ryan asked Stephen on what health outcomes are used under his study. Stephen indicated that Housing is his focus and under the HBAH program there are developmental outcomes. Steve will share indicators with SDoH as well as any preliminary data as his final report will be published in January of 2021. It is important to note that his research is a 1-2-year research based on the housing arrangements of participants when they leave the program. Emily Haaskatzen asked how Mental health issues with clients are addressed under the HBAH program. Stephen indicated that the program refers clients to services they need and does not disqualify them due to mental health issues and the program currently has seen a high level of depression in its participants.

SDoH Workgroup members discussed about the different ways they can solve or help in the housing issue affecting at risk populations. Members agreed there is a great opportunity for the SDoH workgroup to work on this issue as the workgroup is made of nontraditional partners that are at the table to discuss different issues to find a way they can work together navigate the system and help solve the housing issue in Delaware. During the meeting there was a consensus that being able to see the findings from this Ohio program presented by Stephen, gives Delaware an advantage to consider a similar program, learning on the mistakes and enhancing the program the program to make it better.

Lisa Landcraft mentioned it was a fantastic opportunity for care coordination and policy to run parallel to address the Housing issue. Data is important to get funding, ROI to keep sustainability as the intention is to make the program stable. Lisa also mentioned developers should be collaborating with the workgroup and mentioned the possibility of inviting the Executive Director from Reach Riverside to report on metrics.

Emily Haaskatzen suggested to get insurance companies involved to be onboard. Resources are important as well as to work on a clear definition for Homelessness in Delaware.

**Possible Next steps**

Co-chairs will draft a SDoH Workgroup Housing action plan based on feedback received during this meeting. This plan will guide members on what needs to be done in terms of creating policy or have a resolution presented to the Senate.