

Improving Community Outcomes for Maternal and Child Health (ICO4MCH)

Session Law 2015-241, the North Carolina General Assembly allocated funding to be distributed to local health departments to implement evidence-based strategies that are proven to lower infant mortality rates, improve birth outcomes and improve the overall health status of children ages birth to five. The law required the establishment of a competitive process to award local health departments to implement evidenced-based strategies to achieve these aims starting in FY 2016-17. The competitive process to award local health departments to implement the evidence-based strategies was implemented from January 15, 2016 to February 29, 2016. Eight local health departments submitted competitive applications and five were awarded funding.

The Improving Community Outcomes for Maternal and Child Health (ICO4MCH) initiative is located within the Women's and Children's Health Section. The initiative involves statewide collaborative partners, including the Tobacco Prevention and Control Branch, the UNC Center for Maternal and Infant Health, Carolina Global Breastfeeding Institute as well as additional local and regional staff of the Division of Public Health.

The initiative will address three aims: (1) improve birth outcomes, (2) reduce infant mortality and (3) improve the health status of children ages birth to five. The following long-term outcomes will measure the achievement of these three aims:

- the rate of infant mortality for all racial and ethnic groups
- the rate of unintended pregnancy
- birth spacing rates
- preterm birth rates (babies born < 37 weeks)
- low (<2500 grams) and very low (<1500 grams) birthweight rates
- the rate of child death, among children ages 1- 5
- the rate of substantiated child abuse cases
- the rate of out-of-home placements for children ages 0 -5

Local health departments choose one evidence-based strategy within each of the aims to implement. On the next page, please find the funded counties and their selected interventions.

The counties will work with a local community action team (CAT) they develop to implement the evidence-based strategies utilizing a collective impact approach with a health equity lens.

For more information on the initiative, please contact the Program Manager: Leslie deRosset, leslie.derossset@dhhs.nc.gov, 919-707-5609.

	AIMS		
Counties	Birth Outcome	Infant Mortality	Child Health Status
*Appalachian District Health with Avery & Wilkes County Health Departments	Long-acting reversible contraception (LARC)	Tobacco Cessation & Prevention	Positive Parenting Program (Triple P)
Durham County Department of Public Health	LARC	Tobacco Cessation & Prevention	Triple P Family Connects
*Mecklenburg County Health Department with Union County Consolidated Human Services Agency, Division of Public Health	LARC	Ten Steps for Successful Breastfeeding	Triple P
*Richmond County Health and Human Services Department with Cumberland, Hoke & Montgomery County Health Departments	LARC	Ten Steps for Successful Breastfeeding	Clinical Effort to Address Secondhand Smoke Exposure (CEASE)
Robeson County Department of Public Health	LARC	Ten Steps for Successful Breastfeeding	CEASE

*Lead for the collaborative.