

Tri-County MAPP
Reproductive Health &
Healthy Birth Outcomes
Meeting Minutes

Date: Wednesday, July 27, 2016
Time: 3:00 P.M.
Location: Peoria City/County Health Department
2116 N. Sheridan Rd.
Room LL100

Present: Beth Derry (ROE), Chris Wade (Central IL Friends), Cozette Bradford (PCCHD), Olivia Walker (Hult Center), Venus Evans-Winters (ISU), Kristin Thornburg (PCCHD), Bethany Hillman (PPH), Roberta Burns (ICC), Rakeea Mables (BGPI), Gabrielle Okojie (BGPI), Jaida McCloud (BGPI), Serena Winters (BGPI), Lynette Shaw (BGPI), Melissa Theleman (WCHD), Arnitria Shaw (ICC), Kathryn Murphy (City of Peoria), Joyce Harant (Board of Health), Dr. Rahmat Na'Allah (Board of Health), Melissa Adamson (PCCHD)

I. Welcome/Introductions

Melissa started meeting with introductions of everyone.

II. Data and Strategic Questions Review

Our community health improvement plan process was done as a tri-county (Peoria, Tazewell and Woodford Counties). The hospitals, health departments, United Way, and Federally Qualified Health Centers in the tri-county area collaborated to do a combined community health needs assessment using the Mobilizing for Action through Planning and Partnerships (MAPP) framework. The data from the assessments were used to prioritize the following health issues:

- 1 Health Eating, Active Living
- 2 Behavioral Health
- 3 Cancer
- 4 Reproductive Health

The vision for the Tri-County MAPP is a thriving community that's inclusive, diverse, and sustainable to insure health equity and opportunity for the well being of all.

The data collected shows that Peoria exceeds the State of Illinois for teen pregnancy, low birth weight, very low birth weight, Chlamydia, and Gonorrhea. The March of Dimes distributes a State report on maternal child health outcomes and they gave Peoria an F this year based on the data. There is a large disparity between white and black teens in all of these areas. A participant asked why the Latino population is not represented in the data.

As part of the Assessment, the community was asked to rank the most important health issues facing the community. The top issues selected were: mental health, obesity, cancer, aging, diabetes, and early sexual activity. They were then asked to rank the unhealthy behaviors contributing to these issues, which included: drug abuse, anger, violence, poor eating habits, alcohol abuse, lack of exercise, smoking,

domestic violence, child abuse, risky sexual behavior etc. Next, the community was asked to rank the most important issues impacting wellbeing/quality of life, which were: job opportunities, safer neighborhoods, healthy food choices, access to health care, less violence, less poverty, less hatred, availability of child care, affordable housing, transportation, better schools etc.

III. Goals and Objectives Identification

Goals are high level ideals; what we want to achieve by addressing the strategic health issue. Objectives are how we measure our progress in getting there; they are written in SMART format (Specific, Measurable, Achievable, Relevant and Time Related).

The goals and objectives in the previous assessment (2010-2015) were: Goals

- Reduce the incidence of gonorrhea and Chlamydia infection among Peoria county residents.
- Reduce the percentage of Peoria county babies born to women less than 20 years of age.
- Reduce the disparity and percentage of births to teens between Peoria County's White and African American woman

Objectives

- Decrease by 5% incidence of Gonorrhea and Chlamydia.
- Decrease the percentage of infants born to teens by 5% from baseline.
- Decrease the racial ethnic disparity in teen births by 10% from baseline.

The following sample goals were presented for discussion:

- Improve the health and well-being of women, infants, children, and families. (HP 2020)
- Improve pregnancy planning and spacing, and prevent unintended pregnancy (HP 2020)
- Promote healthy sexual behaviors, strengthen community capacity, and increase access to quality services to prevent sexually transmitted diseases (STDs) and their complications.

Comments from discussion regarding goals:

We need to look at the Illinois Youth Risk Behavioral Survey Data to guide us.

In regards to the first goal of improving the health and well-being of women, infants, and children in the black community, this is not culturally relevant to the community because you can't leave the black man out of the equation of the target population.

Bigger issues are things such as unemployment, under-unemployment, food deserts, mental emotional health issues, and domestic sexual violence.

Access to care needs improvement

Sexual education to the youth needs improvement

Parental sexual education needs improvement

Need more data collection instruments

Earlier sexual education needed but also knowledge of level of sexual health for earlier grades

Research shows that poor people value the same things that the average person does as far as getting married, having children, getting a job, and being safe, etc. but poverty is a large contributing factor to issues that hinder that order.

Research in this community has shown that in most of our classrooms, schools, community centers, and programming it really affirms whiteness and white

femininity. When deviated from this norm, then issues of sexuality, LGBT, self-esteem or self-concept are not dealt with. Example: shopping at Wal-Mart for a blow dryer for an African American female's hair. They don't sell one. You have to be a fish out of water to even notice it and that's how a lot of African American females feel when they walk into classrooms or any other setting.

Having the youth voices around the table is very important. Need to bring youth who have had babies to share their stories of why they made the decisions they did and what they learned from them to help those who haven't started yet.

Very few options available to youth who become pregnant in High School as transportation or child care are not provided leaving only the option of GED.

Persons affiliated with faith based institutions need to be around the table.

Marie Moss was recommended as a resource person. She's on the board for Westminster who has a program where they have a van that takes the girl to school and/or work and the child to daycare.

Youth Comments and Concerns:

Seems like the goal is the same and nothing is changing.

When are we going to go back and talk with the School Board?

The schools need to talk to kids way before 6th grade about reproductive health.

When they do talk about reproductive health in the schools all they say is you're going to get pregnant, but not that if you get pregnant your life is going to change.

Schools need to teach about protection and have sexual education classes at youth centers and/or other after school programs.

Why is it that Dunlap is majority Caucasian but they don't get pregnant, but on the South Side it's mostly African-American and the rates are so high?

Some girls get pregnant for economic reasons.

Everything shouldn't be on the schools to teach about sexuality it should be taught at home as well.

The statistics pinpoint race and where the problem lies demographically but it can't be taken personal but there seems to be apprehension of mentioning race which may be a barrier to having a conversation in trying to solve the problem.

You can lead a horse to water but you can't make him drink it but we need to lead that horse to water and figure out what will make the horse drink the water so rates can decrease.

IV. Tentative Goals

Goal 1 - Improve the health and well-being of woman, infants, children and families

-parental education, community partners, cultural norms

Goal 2 - Improve the healthy development, health, safety and well-being of adolescents and young adults

-earlier education (various settings: dream center), information access, service access, health literacy, navigation, cultural norms, youth empowerment, barriers

Goal 3 - Improve planning and spacing, and prevent unintended pregnancy -youth voices and stories, barriers

Goal 4 - Promote healthy sexual behaviors, strengthen community capacity, and increase access to quality services to prevent sexually transmitted diseases (STDs) and their complications

-access to care, men, stigma, cultural norms

Melissa will send out links to the County Health Rankings, Healthy People 2020 and the Community Guide to Prevention so we can start thinking about strategies and working on objectives.

Olivia left hard copies of the schedule for the FLASH program in Peoria Public Schools for the 2016-2017 school years.

Chris informed everyone of the 25th Annual HIV/STD Conference coming up in Springfield on October 25-27, 2016.

V. Next Meeting: Wednesday, August 24, 2016, PCCHD, LL100