

Partnering to address maternal health and housing insecurity in Washington, D.C.



Rising maternal mortality rates

Despite a global trend toward improvement, maternal mortality rates in the United States continue to rise. In 2021, the U.S. maternal mortality rate was more than 10 times the rates of other high-income countries, including Australia, Austria, Israel, Japan and Spain.¹ In the U.S., Black women are 3 times more likely to die from a pregnancy-related cause than white women.²

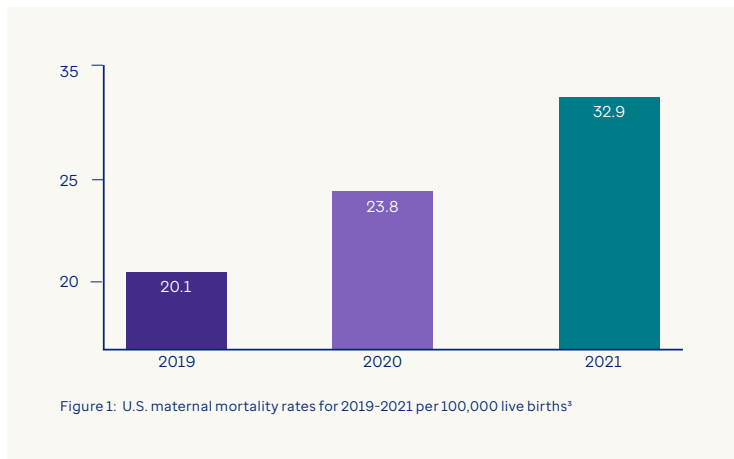


Figure 1: U.S. maternal mortality rates for 2019-2021 per 100,000 live births³



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- In Washington, D.C., where the situation is particularly dire, the maternal mortality rate is 2 times higher than the national rate, and infant mortality is 5 times higher for Black babies than white babies.⁴
- While Black birthing people constitute roughly half of all births in Washington, D.C., they account for 90% of all pregnancy-related deaths.⁵ This is in contrast to white birthing people, who comprise about 30% of births but experienced no pregnancy-related deaths from 2014-2018.⁵
- 70% of pregnancy-associated deaths occur to birthing people residing in Wards 7 and 8, where twice as many residents live in poverty, compared to other wards.⁶
- Approximately 1,270 pregnant women in the District of Columbia, on average, seek housing services annually.⁷

In 2022, a stakeholder group organized by the Optum Center for Health Equity began collaborating to identify solutions to the problem based on stakeholder interviews and Washington, D.C. Health and Human Services research. This Community Equity Collaboration (CEC) included locally based Federally Qualified Health Centers (FQHC), community benefit organizations, UnitedHealthcare and the Optum Center for Health Equity. The goals of the CEC were to:

- **Address health inequities** through partnerships and collaborations
- **Target interventions** addressing social determinants of health (SDOH) by convening community health leaders
- **Identify actionable insights** to reduce cost of care with proprietary analytics platforms and deep data sources
- **Facilitate stakeholder relationships** through local market advisor expertise and care coordination and delivery programs
- **Develop and manage complex projects.** Leveraging years of strategy and implementation expertise

Defining the focus: Homelessness and perinatal care

The CEC conducted more than 20 stakeholder interviews with core community health leaders to reveal needs specific to maternal health disparities in Washington, D.C. Feedback then was combined with Optum Advisory's SDOH analytics, using both public and proprietary data sources. A claims analysis showed:

- Higher complexity and the potential for increased complications and risk for obstetrics patients in Wards 7 and 8⁸
- In Ward 7, 42% of residents spend more than 30% of their income on rent, with 17% relying on public transit and 5% of residents living below the federal poverty guidelines⁸

The analytics helped narrow the focus to homelessness and perinatal care

The Optum Center for Health Equity also reviewed and incorporated recommendations and findings from the Calling All Sectors Initiative (CASI), which was led by the Washington, D.C. Department of Health as a multisector approach to operationalizing health equity in the District of Columbia. CASI was supported by a grant from the Health Impact Project, a collaboration of the Robert Wood Johnson Foundation and The Pew Charitable Trusts.

Building on the recommendations of the CASI report and stakeholder feedback from the CEC, the Optum Center for Health Equity partnered with Community of Hope, an FQHC and homeless services provider, to develop a pilot program that supports birthing people experiencing homelessness by:

- Providing access to a perinatal care coordinator within the Department of Human Services Family Resource Center – this coordinator helps pregnant people experiencing homelessness get more quickly connected to perinatal care services
- Accepting referrals from case managers at homeless services providers for prenatal support services
- Helping pregnant people stay on track with prenatal care
- Offering education on the perinatal period to homeless services providers and on the homelessness assistance system to perinatal health care providers
- Developing a measurement strategy to quantify the impact of the program, outlining potential improvements to internal data capture and program measurement
- Incorporating the client voice through a Community Advisory Council.

A long-lasting, positive impact

By identifying and addressing health inequities through partnerships and collaborations, the pilot is expected to have a long-lasting, positive impact on the health of the community.

Across the partnership, there is enthusiasm for the future of the program, which Community of Hope has named Housing Our Newborns, Empowering You (HONEY). “Community of Hope has long envisioned a world where every baby and every mom have a healthy start together, and there are no disparities in health outcomes for Black birthing people and babies,” says Kelly Sweeney McShane, president and chief executive officer at Community of Hope. “We’re excited to use our core skills in prenatal care and homelessness to develop an innovative, collaborative model that could be replicated in other areas.”

Mylynn Tufte, population health practice lead at Optum, is proud of the collaboration. “The HONEY program is an outstanding example of how cross-industry partnerships can lead to improved community health and have a generational impact. We are excited for the partnership with Community of Hope and Department of Human Services to help make the health system work better for everyone and help people live healthier lives, especially those who have experienced inequities in health care.”

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- Mylynn Tufte

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