

Family Connects Chicago:

Developing a System of Care to Address Health Inequities

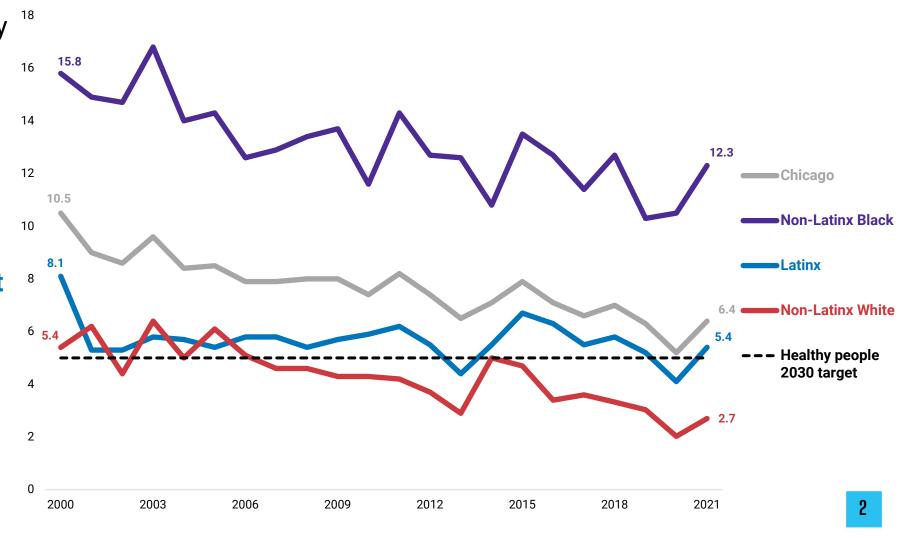






Infant morality has declined, but inequities persist

- **Citywide**, infant mortality decreased **39**% from 2000-2021
- Black infant mortality only decreased 22%
- Latinx infant mortality decreased by 33.3% in the same period, but after 2001 remained flat
- White infant mortality decreased by 50% from 2000-2021
- Inequity between Black and White infants grew from 3x to 5x

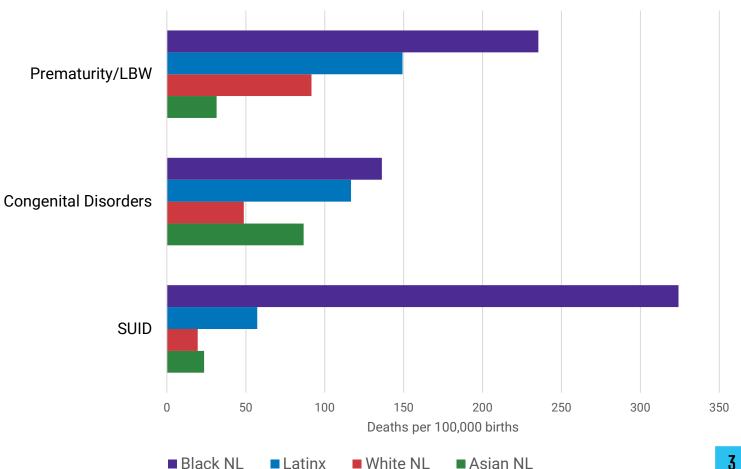




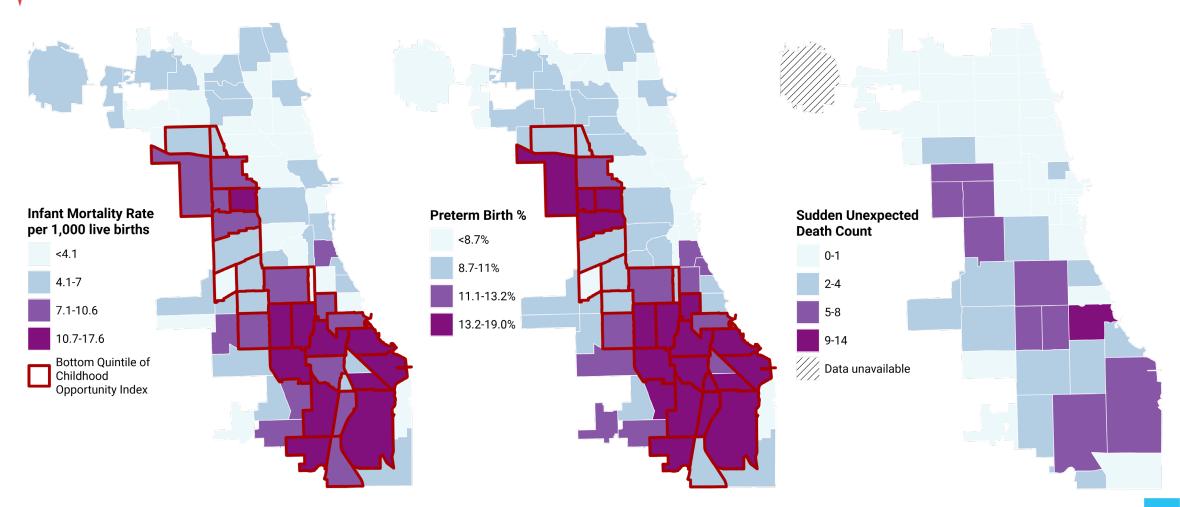
Infant Mortality Causes

- Non-Latinx Black infants experience the highest rates of infant deaths across the top 3 causes
- Between 2017-2021, sudden unexpected infant death (SUID) was the top cause of death for non-Latinx Black infants

Infant Mortality Causes of Death by Race and Ethnicity, 2017-2021



Infant Mortality disproportionately high on South and West sides



Maternal Mortality is increasing and disproportionately affects Black women

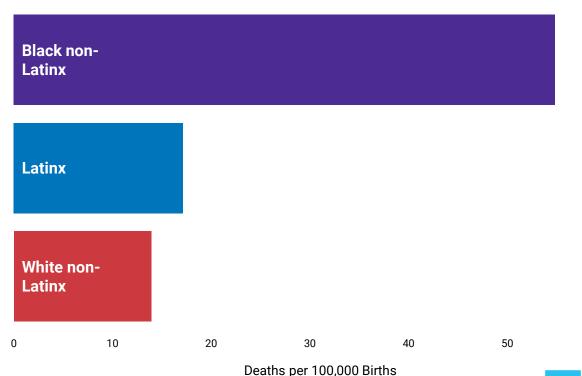




Source: Illinois Maternal Mortality Review Committee, IDPH Vital Statistics, 2015-2020

Non-Latinx Black pregnant people are four times more likely to die from pregnancy-related causes than non-Black pregnant people

Pregnancy-Related Mortality Ratio, 2015-2020

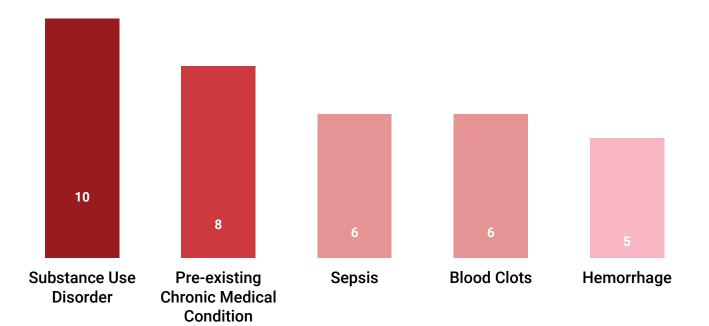




X Maternal Mortality Causes

Substance Use Disorder is the Top Cause of Pregnancy-**Related Death**

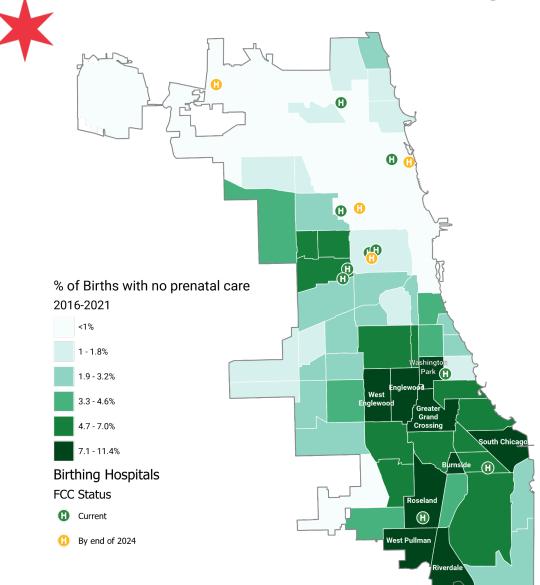
Count of Pregnancy-Related Deaths in Chicago, 2015-2020

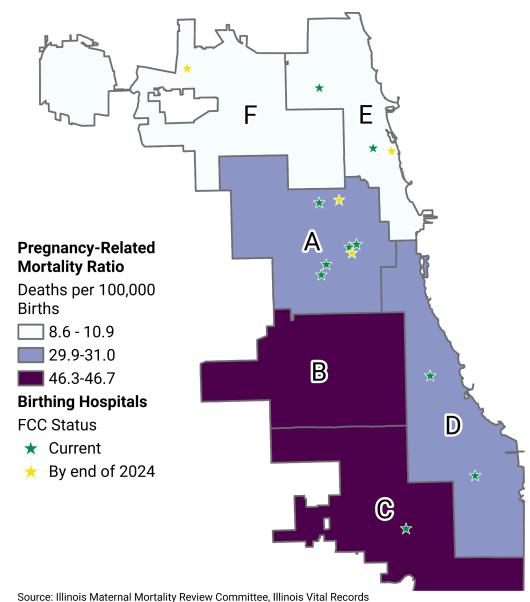


For **Black mothers**:

- sepsis, pre-existing chronic medical conditions, and embolism were the top causes
- 57% of pregnancy-related deaths occur at least one week postpartum
- 89% were preventable

Both lack of prenatal care and Maternal Mortality disproportionately affect South and West side birthing people







Family Connects Chicago: A Systems Solution





The Home Visit: Opportunities to Prevent and Intervene

Nurse visit ~ 3 weeks post-partum to assess health and other needs, including:

- Safe Sleep education and connection to cribs and other materials
- Physical Assessment for the birthing person and infant
- Substance Use Screening and referrals
- Postpartum Depression Screen and referrals
- Confirmation of access to ongoing health care and follow up visits



Building a System of Community Support

Region A and B Sinai

- **Humboldt Park** Health
- St. Mary
- Rush
- Stroger
- Mt. Sinai
- **UI** Health
- St. Anthony

Region C: Everthrive

Roseland

Region D: Everthrive

UChicago

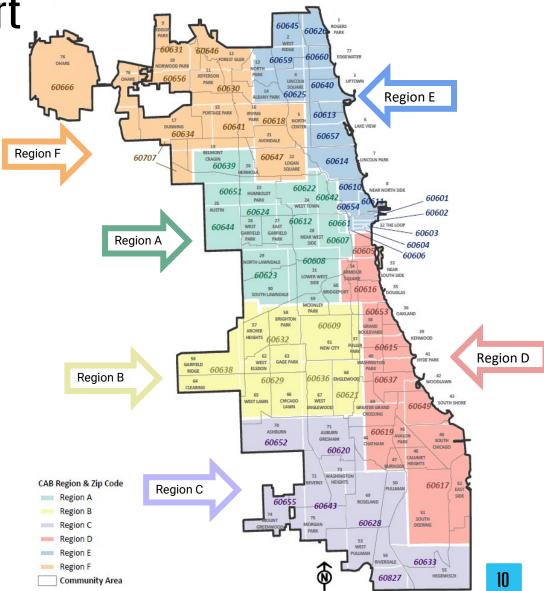
Trinity

Region E: Everthrive

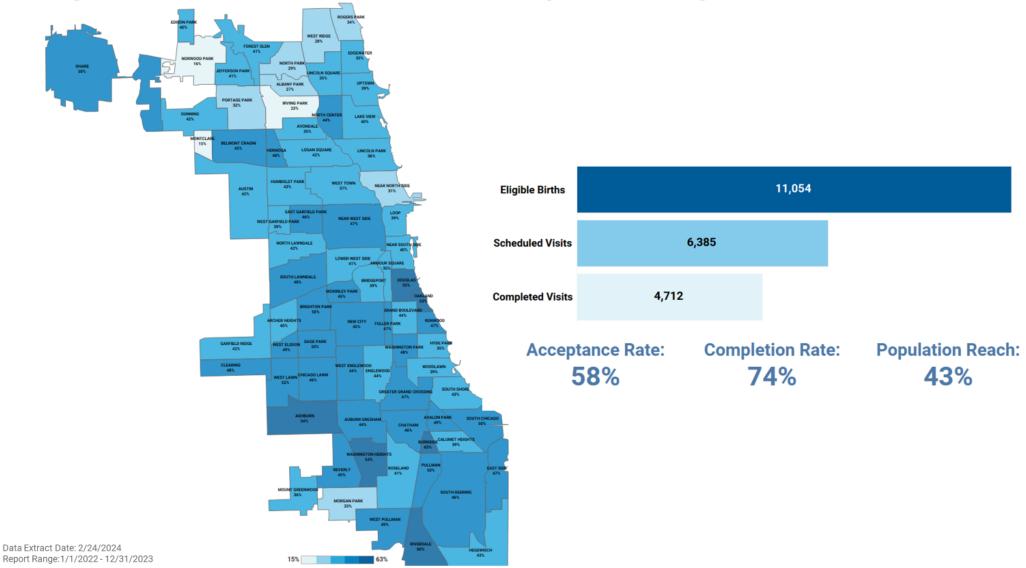
- **IL Masonic**
- St. Joseph
- Swedish
- Northwestern

Region F: MFS

Resurrection

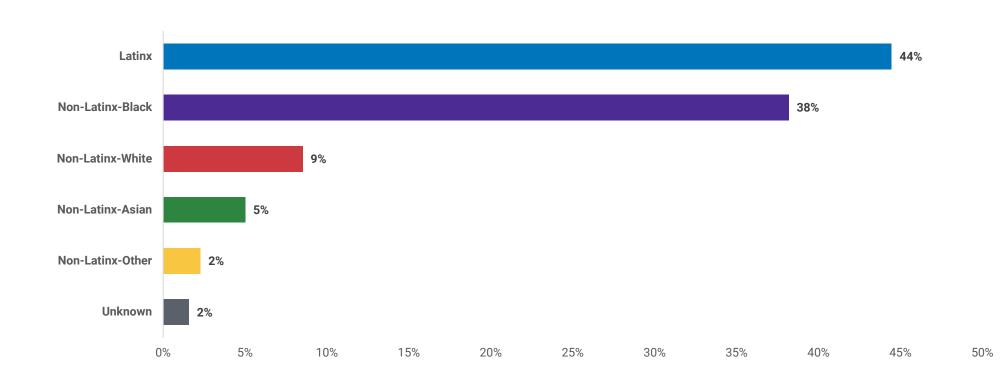


Family Connects Chicago Program Reach by Community Area, 2022-2023





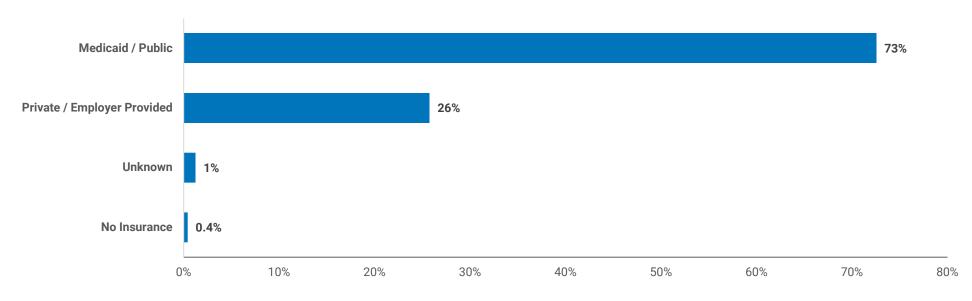
82% of families that completed a Family Connects Chicago visit identified as Latinx or Non-Latinx-Black, 2022-2023



Data Extract Date: 2/24/24 Report Range: 1/1/22 – 12/31/23



73% of families that completed a Family Connects Chicago Visit had Medicaid/Public Insurance, 2022-2023



Caregiver's Primary Insurance Type	Completed Visits
Medicaid / Public	3,419
Private / Employer Provided	1,214
Unknown	59
No Insurance	20
Total	4,712

Data Extract Date: 2/24/24 Report Range: 1/1/22 – 12/31/23



- 1. How do we reach more families (e.g., normalize this support as the standard of care for all Chicagoans)?
- 2. How can we leverage Family Connects Chicago to build a system of support that addresses maternal and infant health inequities that begins in the prenatal period journey?





Questions?



Chicago.gov/Health



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