

Restore Funding for the Black Infant Health Program



The 2014-15 California budget needs to restore funding for the Black Infant Health Program that was cut in prior years from the state's general fund. Given the continuing need for this program, its proven success and the state's improving fiscal outlook, the time is right to restore this funding.

Background

The Black Infant Health (BIH) Program was created in 1989 to address the alarming rates of infant mortality for Black infants. Participants in the BIH Program are those with the greatest risk of adverse birth outcomes and the BIH Program is designed to address all of the complex factors related to infant mortality and preterm births in this population. Services provided include health education, social support, individualized case management, home visitation and referrals to other needed services. Between 2002 and 2007, the BIH Program covered 7.1 percent of Black births in California. The BIH Program currently operates in 15 local health jurisdictions in California.

Proven Success

An evaluation conducted by First 5 LA found that compared to Black mothers in LA County overall, participants in the BIH Program had lower rates of preterm births and infant mortality. In Fresno County, in the first nine years after the BIH Program was implemented, the county decreased the black infant mortality rate by 69%. Statewide results show that the BIH Program has successfully reduced very low birth weight and early preterm births among the population served, despite the BIH Program serving those with a higher risk of poor birth outcomes. Finally, the BIH Program has demonstrated success with educating, empowering and engaging Black mothers in health and social decisions that impact their family.

Health Disparities for Black Infants

There remains a strong need for the BIH Program as significant health disparities for Black infants persist. The infant mortality rate for Black infants is more than twice the state infant mortality rate for all infants. Rates of preterm birth are highest among births to Black mothers at 13.5%, significantly higher than the 2011 state preterm birth rate of 9.8%. One in seven births to Black mothers is preterm and the preterm birth rate is 1.5 times the rate among White mothers.

Funding Cuts

In the 2009-10 state budget, \$3.9 million in state general funds for the BIH Program was eliminated and has not been restored. In addition, \$3.7 million in federal matching funds was lost when this state funding was eliminated. Funding cuts were also made prior to 2009-10 and the BIH Program is currently funded by the Title V MCH Block Grant, Title XIX and local agencies. The state general fund cuts had a devastating effect on the local programs as staffing was reduced and fewer women served. For example, in Fresno County, from 2007 to 2011, staffing for the program was reduced from 11 employees to two employees and the Black infant mortality rate nearly doubled. Significantly, Riverside and San Bernardino Counties were forced to close their BIH Program sites.

Benefits of Restoring Funding

Restoring \$3.9 million in state general funds for the BIH Program can lead to lower costs for delivery, postpartum and infant care. Given that 85% of BIH participants are enrolled in Medi-Cal, investments in the BIH Program have the potential of reducing long-term Medi-Cal costs to the state. The average first-year medical costs are nearly ten times greater for preterm (\$32,325) than for term infants (\$3,325). The lifetime medical costs for infants born too soon are significantly higher than reinvesting in a proven program that serves women at the greatest risk of poor birth outcomes. The BIH Program fits in well with California's prioritization of funding cost-effective early interventions.

If funding is restored, the BIH Program will be able to serve more women and can save the lives of infants in our state. Significantly, this can lead to reductions in infant mortality, low birth weight and prematurity for Black infants. The BIH Program could also reopen sites in Riverside and San Bernardino Counties, which together account for 15% of the Black births in the state. Dedicating funding from the state general fund to the BIH Program is a smart investment for the health of families and the fiscal health of our state.

Support Organizations

All of the below organizations support restoring funding for the Black Infant Health Program:

Alameda County Public Health Department
American Academy of Pediatrics, California
American Civil Liberties Union of California
American Congress of Obstetricians & Gynecologists, District IX
Black Women for Wellness
California Black Health Network
California Children's Hospital Association
California NOW
California Nurse-Midwives Association
California Pan-Ethnic Health Network
California Primary Care Association
Center for Community Health and Well-Being, Inc.
Children Now
Children's Defense Fund-California
Children's Specialty Care Coalition
First 5 Association of California
Health Access California
Kaiser Permanente
League of California Cities African American Caucus
March of Dimes
Maternal and Child Health Access
MCAH Action California Maternal, Child & Adolescent Health Directors
San Mateo County
The Children's Partnership

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