Bridging Maternal & Child Health and Violence Prevention Strategies

How Baltimore Promotes Safety Across the Life Course

This narrative is excerpted from a 2016 presentation by Cathy Costa, Director at the Baltimore City Health Department. Photo credit: André Chung

It is an exciting time for the Baltimore City Health Department, as teams across the department launch an integrated strategy to prevent violence and promote youth wellness, with a deep investment from Maternal and Child Health (MCH). Since starting her role as the Commissioner of Health at the Baltimore City Health Department, Dr. Leana Wen has been a strong proponent for the city to do more to support its young people. Building off of the success of B’more for Healthy Babies, a MCH strategy, we are extending the ‘zero to five’ initiative to support comprehensive youth safety, wellness, and health.

Baltimore, Maryland has gained a reputation for its high levels of violence and has been dubbed ‘Body-More, Murdaland.’ In 2015, the city recorded its deadliest year per capita (55 per 100,000) with a total of 344 homicides. Not only has the city dealt with an excessive number of deaths, but it also faced a 72 percent rise in gun violence in 2015 compared to the prior year (637 shootings in 2015). Many root factors in Baltimore, such as poverty, abandoned buildings, lead poisoning, and hopelessness, have contributed to some communities facing higher rates of multiple forms of violence than others.

Originally MCH didn’t think of violence prevention as part of our domain, but our experience and data show it is incumbent upon us to prevent violence. As someone who leads our Child Fatality Review process, I see the detrimental effects of multiple forms of violence across the life course. For example, a mother experiencing intimate partner violence co-sleeps with her baby to keep the baby safe next to her, despite understanding safe sleep education, and loses that baby to a sleep-related infant death. In another instance, a 2-year-old was fatally abused at the hands of a young father who was repeatedly a victim of violence growing up. A 14-year-old killed himself after finding his mother’s gun under her mattress, and a 16-year-old lost his life to gun violence after a dispute on the street over a stolen phone. Mental health issues, substance use, problems in school, and poor health in later life are some of the outcomes young people face when exposed to trauma and violence. Driven by findings from the Child Fatality Review, our team sees MCH as having a key role to play in preventing violence across the life course.
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While MCH was focused on its strategy, the Office of Violence Prevention and the B’more for Youth Collaborative were developing a separate plan that included goals related to supporting young children and families. Up until recently, the Office of Youth Violence Prevention and the Bureau of Maternal and Child Health functioned and operated separately. In the MCH silo, the health department launched B’more for Healthy Babies with Family League of Baltimore and HealthCare Access Maryland in 2009, due to the alarming infant mortality rates in the city. The initiative has been tremendously successful in bringing the city’s infant mortality rate down 28 percent since its inception, and has specifically helped decrease mortality rates for Black infants by close to 40 percent. B’more for Healthy Babies has expanded over the years to advance policies and practices for young children and families. Aside from decreasing infant mortality rates, preventing abuse and neglect and improving school readiness have become critical objectives of our public health strategy. While MCH was focused on its strategy, the Office of Violence Prevention and the B’more for Youth Collaborative were developing a separate plan that included goals related to supporting young children and families with an emphasis on place and early intervention.

Recognizing the success of B’more for Healthy Babies and the impact of early experiences on later life, the teams saw opportunities to build on and extend the comprehensive MCH initiative to a larger age range. This was a natural connection, as MCH takes a life course approach in its efforts, focusing on outcomes of mothers, babies, children, youth and families. Research also supports tying early childhood development and violence prevention efforts; for example, the ACEs study shows how adversities, including exposure to violence in early life, affect brain development and future outcomes and behaviors.

Multiple stakeholders, including youth, worked together to design an integrated Youth Health and Wellness Strategy to ensure initiatives and agencies across Baltimore are connected to the united strategy – even outside of the Health Department. It consists of collective impact strategies with multiple sectors, including MCH as the backbone and violence prevention as a critical part of achieving youth health and wellness. Strategies exist across the Spectrum of Prevention, from policy and systems change, to community education and social marketing. The purpose is to bring everyone together around a common purpose to align and maximize efforts, funds, and ultimately impact, instead of duplicating work.

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The ACEs (Adverse Childhood Experiences) Study is one of the largest analyses of early experiences and exposures and later health and life outcomes. To learn more visit [https://www.cdc.gov/violenceprevention/acesstudy/](https://www.cdc.gov/violenceprevention/acesstudy/)
The Youth Health and Wellness Strategy connects health to community-level and systems change.

Baltimore City Health Department

Within the Healthy Communities theme, the Safe Streets initiative works with local community-based organizations and outreach workers to serve four priority neighborhoods.

The Youth Health and Wellness Strategy connects efforts that support individual physical, mental and reproductive health to community-level and systems change strategies through its four themes: Healthy Minds, Healthy Bodies, Healthy Communities and Healthy Systems.

Even though violence prevention is explicitly stated under Healthy Communities, the themes are interconnected and relate to increasing safety by supporting positive health outcomes across childhood, adolescence, and beyond.

- **HEALTHY MINDS** focuses on improving mental health and reducing substance abuse, and acknowledging community trauma and stress as fundamental determinants of violence.

- **HEALTHY BODIES** prioritizes preventing teen pregnancy and providing physical health services. Understanding that physical health impacts the ability to function in school, and reproductive life planning affects life planning more generally, this theme emphasizes comprehensive health and sex education in city schools.

- **HEALTHY COMMUNITIES** addresses community-level issues such as food access and violence. Adapted from the Cure Violence model, Safe Streets is one initiative under this theme, in which outreach workers serve four priority neighborhoods through local community-based organizations. They intervene in violent situations and link participants and their families to educational opportunities, employment training and assistance, mental health services, and more. Another program in this theme is the Centers for Disease Control and Prevention’s (CDC) Dating Matters, which seeks to promote healthy relationships to prevent dating violence. Dating Matters includes a curriculum, parent education, youth leadership, and school policy change.²

- **HEALTHY SYSTEMS** focuses on the rollout of youth-friendly standards across all systems to be responsive to youth’s needs, and to transform the city into an inviting place for young people. This theme also aims to improve access, such as telemedicine or mobile van screenings for all elementary school students, through private funding for ‘Vision for Baltimore.’

B’more for Healthy Babies is also in the initial phases of further integrating safety into its early childhood programming, by focusing on preventing child maltreatment and supporting social-emotional development. Reducing child maltreatment is just as important to the MCH team as reducing infant mortality.

We are looking at expanding home visiting programs, making changes in the child welfare system, and partnering with the Department of Social Services. MCH in Baltimore is also narrowing in on positive social and emotional development. The latest assessment shows 52% of young children are not socially or emotionally ready to enter kindergarten, which in turn sets the stage for behavior challenges that put children on a path that can lead to future involvement in violence. Preventing neglect and abuse, and improving school readiness are rising as major goals of B’more for Healthy Babies.

MCH together brings a range of assets and knowledge for preventing violence, whether it is new approaches and frameworks, data, or partnerships for joint action.

² The Office of Youth Violence Prevention continues to engage the B’more for Youth Collaborative and works on additional violence prevention activities and strategies not reflected here. Visit http://health.baltimorecity.gov/programs/violence-prevention for more information.
Addressing violence is fundamental to early childhood outcomes and supporting optimal development is vital to preventing future experiences of violence.

Understanding that violence occurs across multiple forms and is experienced by all age groups, a life course approach offers a mechanism to understand intergenerational connections and trauma. Also, MCH in Baltimore brings expertise and data on how intimate partner violence is the leading cause of maternal mortality, and numbers on child abuse and maltreatment fatalities. This rich data can serve to make the case to funders for prevention efforts, and can be used for outcome evaluation purposes. Finally, MCH has access to and experience in convening partners, including those who violence prevention practitioners may not have as close relations with, such as health and child-serving systems.

Integrated strategies allow for monitoring and evaluation over time. Since systems of support exist across the city, from prenatal and birth to adolescence and beyond, it is possible to evaluate longitudinally. B’more for Healthy Babies highlights metrics around infant mortality, child abuse and neglect, and school readiness, while Youth Health and Wellness examines child fatality, teen births and missed school days. Using a core MCH process in Child Fatality Review, the city is able to monitor metrics and continue to aim for systems change that will make a difference for children, and prevent abuse and neglect, peer and intimate partner violence, and gun violence.

Addressing violence is fundamental to early childhood outcomes and supporting optimal development is vital to preventing future experiences of violence. Aligning and integrating B’more for Healthy Babies and Youth Health and Wellness strategies in Baltimore City has allowed for collective impact to work toward creating a healthy and safe community.

How is the Youth Health Wellness Strategy funded?

The Youth Health and Wellness Strategy leverages funding from a variety of sources to accomplish its goals in the different focus areas. For example, the majority of funding for Healthy Minds comes from a ReCAST (Resiliency in Communities After Stress and Trauma) grant, whereas a large portion on Healthy Bodies funding comes from the U.S. Office of Adolescent Health. Braiding different funding sources together helps keep the strategy, its goals, and strategies sustainable.
CRADLE TO COMMUNITY: A FOCUS ON COMMUNITY SAFETY AND HEALTHY CHILD DEVELOPMENT was a national partnership project of Prevention Institute and the Center for the Study of Social Policy, supported by a grant from the Robert Wood Johnson Foundation. With the UNITY City Network (Urban Networks Increase Thriving Youth) and Early Childhood LINC, the project identified strategic policy, practice, systems, and norms change levers to make communities safer so that all children have the opportunity to develop optimally.

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Cathy Costa presented Baltimore’s Maternal and Child Health (MCH) and violence prevention efforts at the 2016 City MatCH Leadership and MCH Epidemiology Conference. Baltimore has been a long-time member of Prevention Institute’s UNITY City Network. The narrative is excerpted from Cathy’s presentation at this September 2016 event in Philadelphia, PA.

The profile describes how the city went from recognizing that preventing violence is fundamental to supporting child development and preventing future experiences of violence – and moved toward developing a unified strategy. By recognizing overlapping goals, building on areas of strength, braiding funding, and aligning comprehensive efforts, Baltimore City Health Department is attaining greater impact, stronger partnerships, more resources, better evaluation, and increased sustainability.

UNITY, a Prevention Institute initiative, builds community safety in cities through comprehensive, multi-sector strategies that prevent violence and support community resilience. By supporting practice and innovation, UNITY has been collectively advancing the field and shifting the paradigm on community violence and what cities can do about it since 2005.

RESOURCES

Baltimore’s Office of Youth Violence Prevention
Baltimore’s Youth Health and Wellness Strategy
B’more for Healthy Babies
Connecting the Dots: An Overview of the Links Among Multiple Forms of Violence
Cradle to Community: A Focus on Community Safety and Healthy Child Development
First 5 Alameda County: Place-based Community Safety Approaches for Early Childhood Development
The imperative of safety: How community safety supports optimal early childhood development
Working Cradle to Community in New Orleans