Assignment #4: Goals and Objectives

Goal: To reduce the risk of preterm births in Lancaster, California.

* Rationale: Worldwide, 15 million infants are born too soon each year with rates increasing annually (World Health Organization [WHO], 2018). Over 1 in 10 babies are born prematurely and these infants have increased risk of infection, developmental delay, respiratory illness, and even death (HP2030). In the United States, African American women are more likely than other ethnic groups to give birth to a preterm baby with rates 50% higher than preterm birth for white and Hispanic women (CDC, 2018).

Process Objective: By the start of the program, 75% of program staff will have completed cultural competency training prior to working with the program participants.

* Rationale: Cultural competence plays a significant role in improving the health outcomes among ethnic groups that face the most severe health disparities (National Institutes of Health [NIH], 2017). The importance of cultural competence lies in the support multi-ethnic patient populations need in the discipline of public health (Brottman, Char, Hattori, & Taff, 2019). An intervention was developed with an aim of enhancing maternal and child health education and promotion interactions among varying ethnic groups (Weideman, Young, Lockhart, Grund, Fridline, & Panas, 2016). As a virtual simulation intervention, it was shown to be a powerful and modern utility in how health outcomes of maternal patients could be vastly improved with an increase in cultural awareness and sensitivity (Weideman, Young, Lockhart, Grund, Fridline, & Panas, 2016). It is essential for public health professionals to be culturally competent of varying ethnic groups to ensure positive health outcomes.

Short-term Impact Objective: By the end of the program, 30% of the participants will be able to describe at least 2 barriers that prevent them from participating in healthy eating habits throughout pregnancy.

* Rationale: Barriers that inhibit healthy eating habits in pregnancy can be a challenge but building an awareness of those barriers are a crucial step in enhancing maternal and infant health. The nationwide nutritional guidelines of MyPlate promote a balanced diet consisting of fruits, grains, protein, and dairy to support a healthy lifestyle for all Americans, including pregnant women (United States Department of Agriculture [USDA], 2019). It was found in an intervention surrounding maternal nutrition education that 23.1% of participants faced difficulty in healthy eating throughout pregnancy because of scheduling conflicts and 23.1% of participants faced difficulty in dealing with cravings that hinder healthy eating habits (Blondin & LoGiudice, 2018). With the health benefits that nutritional education programs provide and the difficulty that certain barriers can present to individuals, the planners believe that this amount of participants to describe barriers to healthy eating is reasonable.

Intermediate Outcome Objective: Within 3 months of the program, 50% of the participants will report taking at least 2 forms of key prenatal vitamin supplementation as needed to support positive health outcomes in pregnancy.

* Rationale: Prenatal vitamins play a crucial role in maternal and infant health. Over half of African-American women in Los Angeles County reported not taking a multivitamin during pregnancy (Los Angeles County Department of Public Health [LACDPH], 2016). It was also found that the supplementation of DHA was present in approximately 50% of the participants of a maternal nutrition intervention and could safely and effectively prevent LBW births (Carlson et al., 2013). The planners gather that the proportion of participants expected to report taking two forms of key prenatal vitamin supplementation by the completion of the program is feasible.

Long-term Outcome Objective: Within 5 years, there will be a 6% decrease in premature birth rates in Lancaster.

* Rationale: A preterm birthrate reduction of 6% would make a significant impact on the community. Program planners refer to the Healthy People 2030 Maternal, Infant, and Child Health objective 7 (MICH-07), which aims for a 6% reduction in preterm births across the nation (United States Department of Health and Human Services [USDHHS], 2019). A nutrition study among pregnant women in China demonstrated that food selection and dietary patterns can reduce the rate of preterm delivery (Lu, M.S., He, J.R., & Chen, Q., 2018).

References

Blondin, J. H. & LoGiudice, J. A. (2018). Pregnant women’s knowledge and awareness of nutrition. *Applied Nursing Research, 39*(2018), 167-174.

Brottman, M., Char, D., Hattori, R., Heeb, R., & Taff, S. (2019). Toward cultural competency in health care: A scoping review of diversity and inclusion education literature. *Academic Medicine: Journal of the Association of American Medical Colleges* [published online ahead of print].

Carlson, S. E., Colombo, J., Gajewski, B. J., Gustafson, K. M., Mundy, D., Yeast, J., … Shaddy, D. J. (2013). DHA supplementation and pregnancy outcomes. *The American Journal of Clinical Nutrition, 97*(4), 808-815.

Dallaire, D. H., Forestell, C. A., & Kelsey, C. (2017). A nutrition-based program for pregnant incarcerated women. *Journal of Offender Rehabilitation, 56*(4), 277-294.

Los Angeles County Department of Public Health (2016). Health indicators for mothers and babies in Los Angeles County, 2016. Retrieved from http://publichealth.lacounty.gov/mch/lamb/Results/2016%20Results/2016LAMBSurveillanceRpt\_07052018.pdf.

March of Dimes (2018). Low Birthweight. Retrieved from https://www.marchofdimes.org/complications/low-birthweight.aspx.

National Institutes of Health (2017). Cultural respect. Retrieved from https://www.nih.gov/institutes-nih/nih-office-director/office-communications-public-liaison/clear-communication/cultural-respect.

Nnam, N. (2015). Improving maternal nutrition for better pregnancy outcomes. *Proceedings of the Nutrition Society, 74*(4), 454-459.

United States Department of Health and Human Services (2019). Maternal, infant, and child health: Morbidity and mortality. Retrieved from https://www.healthypeople.gov/2020/topics-objectives/topic/maternal-infant-and-child-health/objectives.

United States Department of Agriculture (2019). ChooseMyPlate. Retrieved from https://www.choosemyplate.gov/WhatIsMyPlate.

Weideman, Y. L., Young, L., Lockhart. J. S., Grund, F. J., Fridline, M. M., & Panas, M. (2016). Strengthening cultural competence in prenatal care with a virtual community: Building capacity through collaboration. *Journal of Professional Nursing, 32*(5), S48-S53.

World Health Organization (2018). Maternal, newborn, child and adolescent health: Care of the preterm and low-birth-weight newborn. Retrieved from https://www.who.int/maternal\_child\_adolescent/newborns/prematurity/en/.