



Legislative Fiscal Bureau

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June, 2021

Joint Committee on Finance

Paper #356

Black Women's Health and Reducing Disparities in Infant and Maternal Mortality (Health Services -- Public Health)

[LFB 2021-23 Budget Summary: Page 280, #3]

CURRENT LAW

The Centers for Disease Control and Prevention (CDC) indicates that health equity is achieved when every person has the opportunity to attain their full health potential, with no one disadvantaged from achieving this potential because of social position or other socially determined circumstances. Health inequities are reflected in differences in length of life, quality of life, rates of disease and disability, severity of disease, and access to treatment. Health disparities are differences in the incidence, prevalence, and mortality of a disease and the related adverse health conditions that exist among population groups.

The Department of Health Services (DHS) administers several programs that can play a role in increasing health equity and reducing health disparities in Wisconsin.

The Division of Public Health is currently budgeted \$383,600 GPR annually to fund minority health grants. This program awards grants of up to \$50,000 for activities to improve the health of economically disadvantaged minority group members. Grant recipients are required to provide at least 50% in matching funds from other sources. In addition, DHS is required to allocate up to \$50,000 of this funding to provide as a grant to a private nonprofit corporation to conduct a public information campaign on minority health. Recently-funded projects include expansions of community health worker services in rural and urban areas, outreach by a local YWCA to promote youth fitness, interventions to reduce the burden of youth tobacco use, and culturally competent mental health outreach and screenings. A list of the 2020-21 grant recipients, along with DHS descriptions of the project goals, is provided as Attachment 1 to this paper.

Several other current state and federally-funded programs also contribute to the promotion

of health equity. The CDC reports that, in 2018, 6.8% of non-Hispanic White adults in Wisconsin were diagnosed with diabetes, compared to 12.5% for Black adults and 12.3% for Hispanic adults. To address these disparities, DHS has funded several organizations that use community health workers (CHWs) to coordinate diabetes care, with a focus on high-risk populations. CHWs specialize in bridging the gaps between healthcare systems and populations they serve. During each of the past several years, DHS has provided approximately \$960,000 FED from CDC grants for diabetes prevention and management and \$20,000 GPR for these grants.

State and federal funding that supports maternal and infant health care also supports programs that foster health equity, as some of these programs explicitly address gaps in the healthcare system by targeting underserved geographic areas and low-income populations. Wisconsin currently receives \$10.8 million per year from the federal Maternal and Child Health Services Block Grant to support a variety of services, including improving access to healthcare for mothers and children, family planning services, and outreach and interventions to promote prenatal and postnatal health. DHS distributes approximately \$2.8 million of this funding to local health departments to promote women's and children's health in local communities.

The medical assistance program offers a prenatal care coordination benefit, using federal block grant funds for administrative coordination and outreach. This benefit provides care planning and coordination, health education, nutrition counseling, and connections to services for women with high risk of adverse pregnancy outcomes.

Several other programs administered by DHS are intended to address women's health and infant mortality. The well-woman program, with base funding of \$2,428,200 per year, provides preventative health screenings to uninsured or under-insured women and provides \$1.4 million annually to local health departments. The state's women's health block grant provides \$1,742,000 GPR annually for women's healthcare, including reproductive healthcare, education and counseling, preventative screenings, and family planning services. Two other GPR-supported programs also support maternal and infant health -- \$222,700 per year is budgeted annually to reduce fetal and infant mortality and morbidity in the City of Racine, and \$188,200 annually supports a statewide outreach and referral program for low-income pregnant women.

DISCUSSION POINTS

1. Different communities in Wisconsin experience significantly different conditions and treatment affecting health, resulting in disparities in a wide variety of health outcomes. This inequity is the product of many interacting factors, including economic inequality, environmental health hazards, and discrimination based on race and ethnicity in the health system and elsewhere. Every community is impacted by these factors in unique ways that cannot be attributed simply to identifiers such as race, but statistical analysis on the basis of race suggests the scale and prevalence of the disparate benefits and harms experienced statewide.

2. The state health plan, *Healthiest Wisconsin 2020*, models health as the product of four factors: a person's behaviors and habits, the direct healthcare services they receive, social and economic conditions they experience, and their physical environment. Attachment 2 illustrates this

model. Health disparities between two groups can arise and be reinforced by disparities in each of these factors. Increasing funding for the current minority health grant program, or approving new initiatives, could support a wide variety of interventions to address disparities in any of these four factors determining health -- as illustrated by the array of funded programs listed in Attachment 1.

3. Social and economic disparities make significant contributions to racial disparities in health in Wisconsin, but the state health plan also identifies these determinants as opportunities for cost-effective interventions. Relatively small investments in programs that counteract social and economic risk factors can yield larger savings by preventing the need for costly medical care. Research cited in the health plan finds strong links between health and access to employment, education, income, housing and social support.

4. Life expectancy is a useful indicator of general health, and the table below shows certain measures of disparities in life expectancy. State death records indicate that White residents in Wisconsin live an average of 15 years longer than Black residents.

Disparities in Life Expectancy at Birth in Wisconsin by Race, 2018

White	76
Asian American	65
Native American	62
Black	61
All Races	75

5. Heart disease serves as an example of a more specific health disparity between communities. In Wisconsin, Black women are seven times as likely as White women to die from a premature stroke (before age 65), and Black men are at four times the risk of White men to die from a premature stroke. CDC data compiled by the Kaiser Family Foundation indicate that Wisconsin has the third-highest racial disparity in the rates of death by stroke in the country.

6. The CDC identifies HIV/AIDS, sexually-transmitted diseases (STDs), and tuberculosis as other health conditions that show significant racial disparities. In Wisconsin, Black residents represent 7% of the population but account for 38% of AIDS deaths; the AIDS death rate among White residents is less than one twelfth as high as the rate among Black residents, the 47th largest White-Black disparity, by state, in the nation. The CDC reports that Black residents diagnosed with HIV are less likely than members of other racial groups to receive care.

7. Wisconsin has similarly large Black-White racial disparities in rates of chlamydia and gonorrhea. The CDC reports that, nationwide, Black men and women are five and seven times as likely as White men and women, respectively, to contract chlamydia. In Wisconsin, Black residents have ten times the risk of White residents; only Pennsylvania has a larger disparity. The CDC reports the rate of cases of gonorrhea among Blacks in the United States was 7.7 times the rate among Whites. In Wisconsin, the rate among Black residents is 24.8 times the rate among White residents. At over three times the national average, this disparity is the largest in the country.

8. Infant mortality also reveals distinct racial disparities. State death records indicate that, in Wisconsin, Black babies die before their first birthday three times as often as White babies, and Native American babies die at twice the rate. The table below shows the infant mortality rates for each racial and ethnic group tracked by the state.

Disparities in Infant Mortality in Wisconsin by Race and Ethnicity, 2016–2018

<u>Race or Ethnicity</u>	<u>Infant Deaths per 1,000 Live Births</u>
Hispanic	6.3
Non-Hispanic	6.1
Non-Hispanic White	4.8
Non-Hispanic Lao or Hmong	6.6
Non-Hispanic Native American	9.1
Non-Hispanic Black	14.6
All Races and Ethnicities	6.2

9. Research cited by the state health plan identifies burdens on the state's economy arising from racial and ethnic health disparities. Poor health, specifically when concentrated in particular communities, negatively affects workforce participation, productivity, and household income, among other economic inputs.

10. AB 68/SB 111 would provide \$1,750,000 GPR annually, beginning in 2021-22, to address the racial disparities in women's health by providing targeted grants to organizations led by Black women in Racine, Dane, Milwaukee, Rock, and Kenosha Counties to improve Black women's health. In addition, the bill would provide \$1,750,000 annually for DHS to award to organizations that work to reduce racial disparities related to infant and maternal mortality, and one time funding of \$500,000 GPR annually in the 2021-23 biennium for DHS to provide as a grant to an entity to connect and convene efforts between state agencies, public and private sector organizations, and community organizations to support a statewide public health strategy to advance Black women's health.

11. Grants focusing specifically on Black women's health provide an opportunity to address health inequities that disproportionately affect women. As previously indicated, race affects women's experience of heart disease much more severely than men's. As another example, Black women are more than three times as likely as White women to die from diabetes in Wisconsin, while the disparity for men is slightly less than a factor of two.

12. Wisconsin's statewide Black infant mortality rate is the highest of any state in the nation, over 30% above the nationwide average of 10.5 deaths per 1,000 live births, according to CDC data for 2018.

13. Wisconsin has significant racial disparities in pregnancy outcomes for mothers as well. Black mothers experience 1.75 times the risk of significant complications from labor or delivery facing White mothers, and five times the risk of dying in childbirth or from complications, based on

DHS data.

14. Infant mortality is an important measure of mothers' health, and another indicator of significant racial disparities particular to women. The table below shows the disparity in infant mortality between Black and White mothers in the state as a whole as well as five selected counties for which the Governor recommends targeting funds.

Racial Disparities in Infant Deaths per 1,000 Live Births, 2009–2018

<u>County</u>	<u>White Infant Mortality Rate</u>	<u>Black Infant Mortality Rate</u>	<u>Ratio</u>
Rock	5.1	17.4	3.4
Racine	5.4	17.3	3.2
Dane	4.2	12.4	3.0
Milwaukee	4.9	14.3	2.9
Kenosha	5.0	12.5	2.5
Statewide	4.8	14.1	2.9

15. AB 68/SB 111 would provide one-time funding of \$500,000 GPR in both 2021-22 and 2022-23 as a one-time grant for an organization to act as a statewide coordinator of efforts to promote Black women's health. This entity would bring together state agencies, public and private sector organizations, and community organizations to support a statewide public health strategy. The administration indicates that this funding would be used to respond to the complexity of racial disparities in health and facilitate interventions across different systems and agencies. The funding level of \$500,000 per year reflects an estimated need to hire multiple staff to achieve this coordination.

16. While this paper discusses health disparities affecting Black women specifically, disparities exist between other groups in the state as well. Several options are presented for the Committee's consideration, including some or all of the three initiatives recommended by the Governor (Alternatives A1, A2, and A3). However, based on the broad purposes for which funding is currently provided under the minority health grant program, the Committee could instead increase funding for grants under the current minority grant program, so that these initiatives could be evaluated by DHS staff along with other grant proposals (Alternatives B1 through B6).

17. The American Rescue Plan Act provides approximately \$2.5 billion to Wisconsin's state government and \$2.3 billion to cities and counties in Wisconsin for expenditures made from March 3, 2021, to December 31, 2024, to respond to the public health and economic impacts of the COVID-19 pandemic. The U.S. Department of the Treasury specifies that, because the COVID-19 pandemic deepened health disparities, these funds may be used to improve health outcomes among disproportionately impacted populations. The Treasury provides examples of eligible activities, including funding community health workers, benefits navigators, housing supports, remediation of lead paint hazards, community violence intervention programs, and programs supporting children's mental health. Although there are some differences in target populations and eligible activities, this potential use of federal funds overlaps somewhat with goals of the grant expansions discussed in this

paper. In light of the one-time nature of these federal funds, the Committee could delay providing a GPR grant increase until 2022-23 (Alternatives B2, B4, and B6), thereby reducing GPR expenditures in the biennium, but still providing an ongoing funding increase for the Division of Public Health to address health disparities in the future.

ALTERNATIVES

A. Governor's Proposals

Approve one or more of the following:

1. Provide \$1,750,000 annually to award grants to organizations led by Black women to improve Black women's health in Racine, Dane, Milwaukee, Rock, and Kenosha Counties. Modify the current appropriation from which DHS funds minority health grants to contain references to this ongoing allocation.

ALT A1	Change to Base
GPR	\$3,500,000

2. Provide \$1,750,000 annually to award grants to organizations that work to reduce racial disparities in infant and maternal mortality. Modify the current appropriation from which DHS funds minority health grants to contain references to this new ongoing allocation.

ALT A2	Change to Base
GPR	\$3,500,000

3. Provide one-time funding of \$500,000 per year in the 2021-23 biennium to an entity to coordinate efforts between state agencies, public and private sector organizations, and community organizations and support a statewide public health strategy to advance Black women's health.

ALT A3	Change to Base
GPR	\$1,000,000

4. Take no action.

B. Minority Grant Program

1. Increase funding for the minority grant program by \$4,000,000 per year.

ALT B1	Change to Base
GPR	\$8,000,000

2. Increase funding for the minority grant program by \$4,000,000 per year, beginning in 2022-23.

ALT B2	Change to Base
GPR	\$4,000,000

3. Increase funding for the minority grant program by \$3,000,000 per year.

ALT B3	Change to Base
GPR	\$6,000,000

4. Increase funding for the minority grant program by \$3,000,000 per year, beginning in 2022-23.

ALT B4	Change to Base
GPR	\$3,000,000

5. Increase funding for the minority grant program by \$1,000,000 per year.

ALT B5	Change to Base
GPR	\$2,000,000

6. Increase funding for the minority grant program by \$1,000,000 per year, beginning in 2022-23.

ALT B6	Change to Base
GPR	\$1,000,000

7. Take no action.

Prepared by: Carl Plant
Attachments

ATTACHMENT 1

2020-21 Minority Health Program Grant Recipients

Community Grants

- **F.O.S.T.E.R. of Dane County, Inc.** *Increasing Black Health Equity During Tumultuous Times*

Recommended Funding Amount: \$48,900

The primary goal of this health equity project is to promote the overall wellness and mental health of Black girls ages 11-17, and their families, through a two-generation approach using an innovative online platform. Objectives include enrolling up to 250 Black girls from Dane, Milwaukee and Waukesha counties in the program, providing tools and strategies for resilience to promote healthy living and increase mental and emotional wellbeing, along with supplemental wraparound social services, and developing a statewide dissemination plan for the program. The outcomes of the project are to decrease suicidal thoughts, decrease anxiety or depression and promote overall mental wellbeing in Black families.

- **Lussier Community Education Center** *Pick Up the Mic: Madison Youth Name and Address Racial Disparities*

Recommended Funding Amount: \$42,700

Pick up the Mic encourages Black youth to share their perspectives on racial disparities in education in Madison. In a podcast produced from project interviews, 24 Black high school students and 8 teachers/community leaders will tell the truth about their experience and advocate for change. LCEC will partner with Madison Metropolitan School District to recruit students, teachers and community leaders as well as with Media 22 LLC, an African American owned multimedia company providing high quality audio production and instruction, to produce the podcast recordings.

- **Planned Parenthood of Wisconsin** *Promotores de Salud – Reaching Latinx Families Statewide*

Recommended Funding Amount: \$50,000

The *Promotores de Salud* program will use their existing Latinx networks in multiple WI communities, primarily in southeast Wisconsin, to expand the program's social networks approach to health into four new target geographic areas – La Crosse, Platteville, Wood County and Green Bay. Supporting Latinx community members during COVID-19 and beyond, 20 Community Health Promoters (Promotores) will address Latinx health disparities through outreach, discussions and workshops with 750 Latinx individuals (3,000 friends/family). Goals are to support Latinx communities in accessing basic needs/health resources.

- **Jump at the Sun Consultants, LLC** *Wisconsin We're Better than this: Anti-Racism Public Health Initiative*
Recommended Funding Amount: \$50,000
 The primary goal of the project is to design and pilot-test anti-racism learning circles and an anti-racism media campaign to help dismantle structural racism that contributes to tobacco disparities in African Americans. Based in Mequon, the project intends to engage the general public, African Americans in the community and decision makers and employers from various sectors across Wisconsin. The expected outcome is to reduce the prevalence of tobacco use in African Americans by positively changing personal beliefs, social norms, institutional practices and policies.
- **Muslim Community and Health Center**
Recommended Funding Amount: \$30,500
 The Muslim Community and Health Center (MCHC) will implement a Minority Health Community Grant to increase awareness and address stigmas regarding tobacco use in the African and Asian Community. The initiative seeks to provide community education to 200 Middle and High School students at Salam School -- an Islamic school located in the city of Milwaukee dedicated to quality academic education in an Islamic environment. MCHC will educate students about prevention of substances including cigarettes, vaping products and hookah utilizing the Wisconsin Department of Health Services information on *Tobacco is Changing*, as well as, the Stanford Medicine Tobacco Prevention Toolkit.
- **Health Connections Incorporated** *COVID-19 Testing & Community Outreach Program*
Recommended Funding Amount: \$50,000
 The main goal of this project is to provide targeted onsite COVID-19 testing and contact tracing plus mental health and basic needs assessments with Black/African American populations in Milwaukee County -- the most disproportionately impacted by COVID-19 in Wisconsin. The expected outcome is to fill trust gaps and thereby improve their health and service systems by identifying isolated COVID-19 cases and connecting citizens to clinical, mental health and social services as needed.
- **Aurora UW Academic Medical Group, Inc./Walker's Point Community Clinic** *Walker's Point Community Clinic Hispanic Women's Stress Management Program*
Recommended Funding Amount: \$30,800
 Aurora Walker's Point Community Clinic, Wisconsin's largest free clinic located in Milwaukee, intends to expand its evidence-based, Hispanic women's stress management programs -- Venga y Relajese (Come and Relax) and Venga y Siga Creciendo (Come and Keep Growing). Funds will support an increase in programmatic frequency and participant capacity, as well as offer new programs, and allow the Clinic to hire a bilingual Community Health Worker in services of the program expansion. AWPCC patients include a large, non-English speaking Hispanic and immigrant population, many of whom are uninsured and living at or below 200 percent of the poverty line and for whom there is a significant lack of stress reduction programs.

- **YWCA Green Bay-De Pere** *Fitness Exploration for Minority Middle Schoolers*

Recommended Funding Amount: \$33,500

This program by YWCA Greater Green Bay (YWCAGGB) aims to help low-income minority middle school students try many different styles of physical fitness activities in an effort to help kids connect with a fitness activity they can take with them their entire lives. YWCAGGB will introduce 80 low income, American Indian, African American and Latino middle school students in the Greater Green Bay area to 10 fitness activities, with the ultimate long-term goal of cultivating an interest in physical activity and gaining lifelong healthy habits.

- **One RBN Wellness, Inc.** *The RBN (Relate, Build, Nurture) Project*

Recommended Funding Amount: \$13,600

One RBN Wellness, Inc. is a non-profit organization located in Shawano, WI. The RBN (Relate, Build, Nurture) Pilot Project is aimed at improving community and family relationships, increasing mental health awareness, and improving outcomes for at risk American Indian youth. The project will engage youth and adult support in activities that will promote healing and education, including family education sessions aimed at mental health screening, awareness, education and resource provision, as well as sessions focused on traditional American Indian arts with a local artist.

Public Health Information Campaign

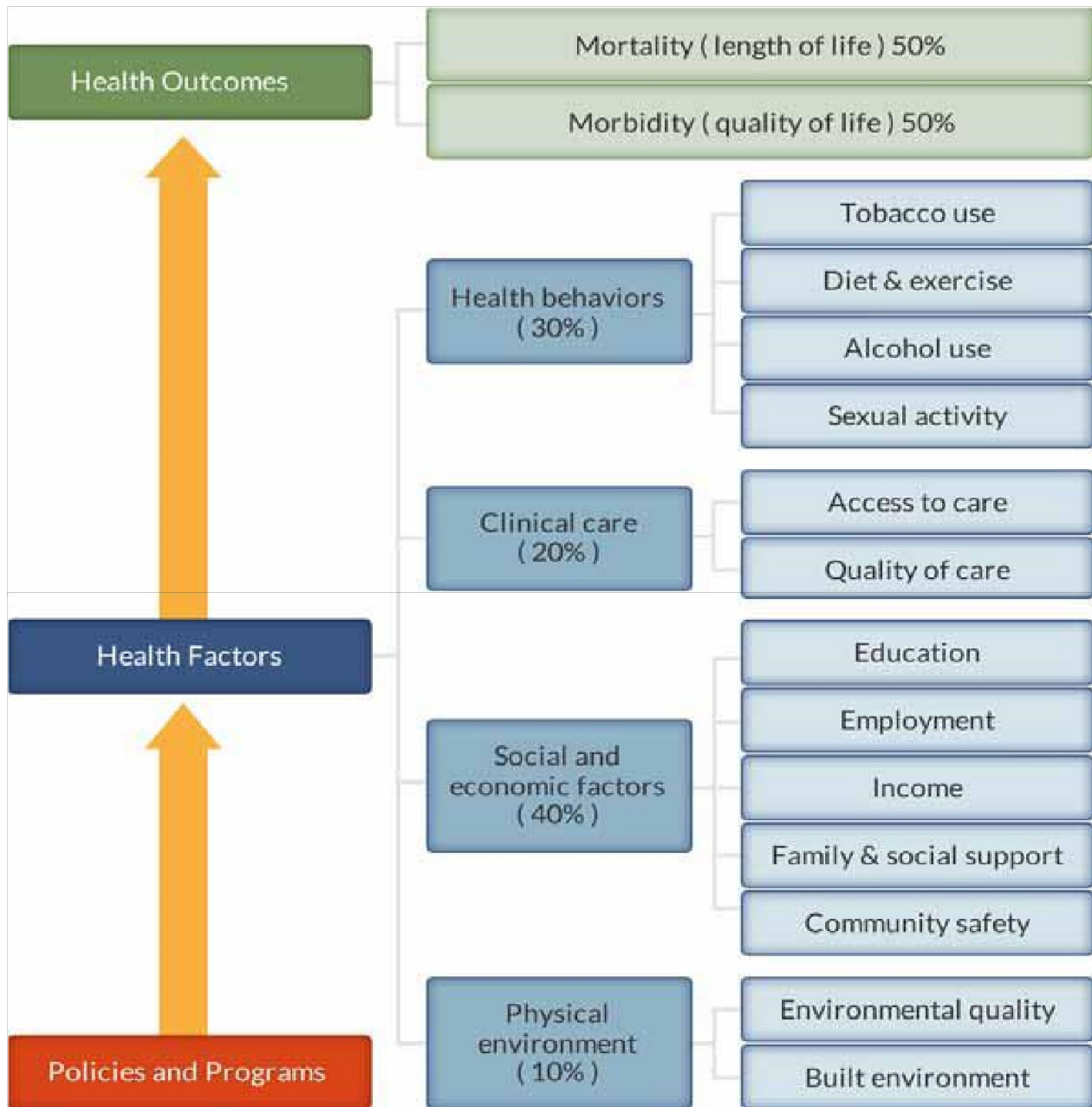
- **Centro Hispano of Dane County** *ACEs Prevention among Latino Immigrant families in response to the COVID-19 Pandemic*

Recommended Funding Amount: \$33,600

This project will create and disseminate culturally and linguistically appropriate videos to prevent risk of ACEs in Latinx immigrant community during the COVID-19 pandemic. Two licensed bi-cultural and bilingual mental health providers and an experienced community health promoter will develop 6 training videos in Spanish to provide current information and resources around mindfulness, healthy communication, mental, emotional and spiritual health and child development.

ATTACHMENT 2

Model of the Determinants of Public Health



County Health Rankings model ©2012 UWPHI

Source: University of Wisconsin School of Medicine and Public Health, *Mobilizing Action Toward Community Health, County Health Rankings*. Accessible at <http://www.countyhealthrankings.org/about-project/background>.