Jazmon’s Story:
Military Wife Gains Support from Black Infant Health

“If I didn’t have Black Infant Health during my pregnancy, my life would have been a lot more stressful, being a military wife.” —Jazmon

Jazmon (pictured above, with her daughter Macie) was a newly married military wife and new to California when she found out she was pregnant.

“What the Black Infant Health program provided to me as a military wife was support,” Jazmon says. “I enjoyed going to the groups and making connections with other women who were expecting just like me.”

In particular, Jazmon appreciated being able to join a program for Black women. “In a time that’s so sensitive like pregnancy, Black Infant Health provided me comfort with being around people who look like me.”

Experts believe social, economic and racial stressors play an important role in Black women’s poor maternal and birth outcomes. Within a culturally affirming environment and honoring the unique history of Black women, the Black Infant Health (BIH) program helps women have healthy babies. Prenatal and postnatal group sessions and one-on-one meetings with trained case managers enable participants to learn proven strategies to reduce stress and develop life skills.

In Jazmon’s case, BIH also provided valuable education. Black women have a 52 percent higher risk of preterm birth than White women. When Jazmon went into labor five weeks early, she stayed calm and knew what to expect. “I felt really educated when it was time for me to give birth to Macie early, and just having the knowledge made me a lot more comfortable.”

Baby Macie spent just two days in the NICU, and is now a happy, healthy and busy 11-month-old. Jazmon has been breastfeeding since Macie was born, and attributes that success to BIH. “We talked about breastfeeding, the benefits and lack of it in my culture. It helped me realize how beneficial it would be for my baby to breastfeed, and I’m grateful Black Infant Health brought that perspective to me.”

Jazmon remains in touch with other women from her BIH group. The friendships and support continue, more than a year later.

“If I didn’t have Black Infant Health, I can honestly say that during my pregnancy, my life would have been a lot more stressful, being a military wife. The program gave me support away from home. It made me feel empowered and strong.”

Jazmon, Macie and Matthew
Meet the **Black Infant Health** Program

**Racism and social and economic stressors play an important role in poor birth outcomes—babies born too early and too small—for Black women.**

Black Infant Health (BIH) recognizes the impact of historical racism and how long-term exposure to stress can negatively influence maternal and infant health outcomes, regardless of socioeconomic status. Within a culturally supportive environment, and honoring the unique history of African-American women, BIH aims to help women have healthy babies.

BIH implements an evidence-informed intervention that uses a group-based approach, where participants get to meet, interact and build a sisterhood with other Black women. Group sessions are complemented with participant-centered life planning, goal setting and referrals to services for participants and their families. This powerful combination serves to help women enhance life skills, learn proven strategies to reduce stress and build social support. Ultimately, this two-pronged approach impacts not only participants themselves, but future generations of Black women, infants and families.

**Where We Are:** Services are provided in communities where approximately 90% of African-American births occur:

**Counties**
- Alameda
- Contra Costa
- Fresno
- Kern
- Los Angeles
- Riverside
- Sacramento
- San Bernardino
- San Diego
- San Francisco
- San Joaquin
- Santa Clara
- Long Beach
- Pasadena

**Our Goal:** To improve African-American infant and maternal health, as well as decrease Black-White health inequities and social inequities for women and infants.

**We Serve:** African-American women who are 18 years or older and up to 30 weeks pregnant at the time of enrollment regardless of income.

**Service Delivery:** Services are free and provided by Family Health Advocates, Group Facilitators, Public Health Nurses and Social Workers.

**Outcomes:** Current science supports an empowerment-focused, group-based intervention as a promising strategy for improving African-American women’s birth outcomes. BIH participants report:

- Stronger positive connections to their heritage and the African-American women in their community
- Increased empowerment to make behavior changes that lead to living a healthier life
- Better understanding of effective strategies to manage and reduce stress

**Infant Mortality by Race/Ethnicity**

Graphic chart above is a representation of surveillance data. Contact MCAHDataHelp@cdph.ca.gov for actual data.