

# QI-TRACS

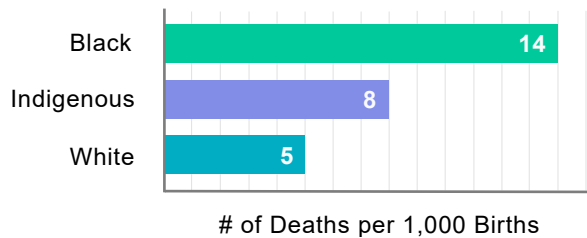
**Reducing Disparities through Training, Accountability, and Community Supports (QI-TRACS)** aims to implement Baby-Friendly USA & WHO strategies – using an explicit racial equity lens – to reduce disparities in breastfeeding rates among Black and Indigenous dyads, as well as decrease birthing person and infant morbidity and mortality through hospital and community partnership, participation, and policy.

## PROBLEM

### Michigan Infant Mortality

Infant mortality is high in Michigan, with glaring racial disparities.

#### Infant Deaths in Michigan by Race, 2020<sup>1</sup>



## STRATEGY

### Why Breastfeeding

**26%** Decrease in odds of infant mortality, as a result of breastfeeding.<sup>2</sup>

Michigan hospitals are encouraged to adopt the WHO [Ten Steps to Successful Breastfeeding](#) to improve breastfeeding outcomes. However, efforts in the last decade may have improved overall outcomes, but have failed to address glaring breastfeeding disparities that contribute to survival gaps. Another approach is needed.

QI-TRACS provides an opportunity for Michigan birthing centers to implement the Ten Steps to Successful Breastfeeding, but this time with their community as their **inspiration, compass, and partner**.

## OUTPUTS

### Enter QI-TRACS



- 7** Hospital birthing centers engaged
- 7** Community organizers co-leading quality improvement (QI) with clinical staff
- 7** Hospital-Community Task Forces (HCTFs) centering community voice in hospital QI.
- 1** Goal: To close racial gaps in breastfeeding and birth outcomes

## ACTIVITIES

### Disrupting Hospital QI...

- Using shared power model
- Including dual-capacity and DEI training.
- Stratifying data by race
- Offering a collaborative forum
- Matching funds given to hospital and community
- Providing additional satellite grants to increase community capacity