

**Life Course Symposium
Strong Roots, Healthy Fruit:
Transforming Generations Through the
Life Course Perspective
Philadelphia, PA**

June 29th-30th, 2010

**Strong Roots Healthy Fruit:
Applying the Life Course
Perspective to Address Social
Determinants of Health**

Mario Drummonds, MS, LCSW, MBA
CEO, Northern Manhattan Perinatal
Partnership, Inc.
Principle Investigator,
Central Harlem Healthy Start



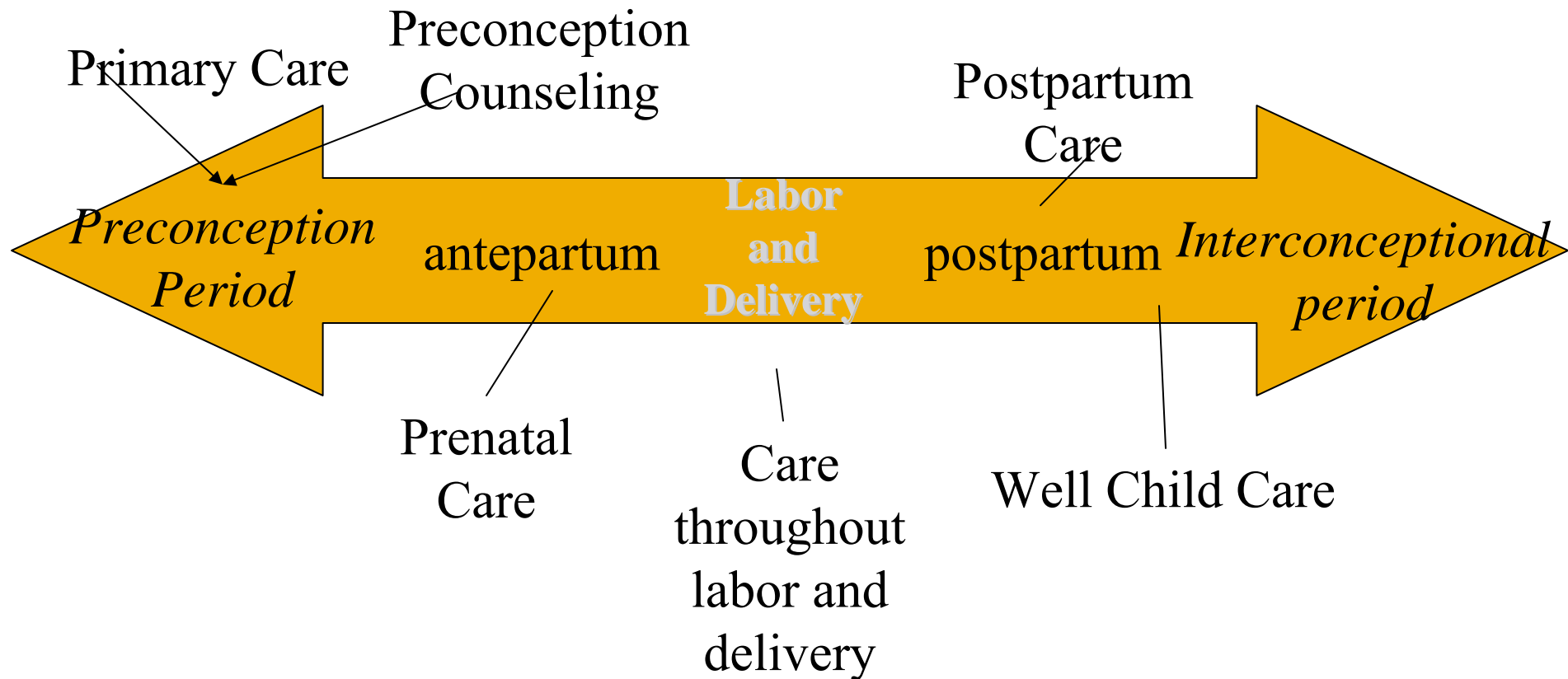
Presentation Objectives

- **Provide Guidance to Operationalize Life Course Theory Programmatically & Organizationally in Philadelphia**
- **Define what is a MCH Life Course Organization**
- **Review Implications to Practice for Philadelphia**
- **Develop a few Strategies to Resolve Social-Determinants- of-Health in Philadelphia**

Life Course Theoretical Assumptions & Implication to MCH Practice

- Diminished Role & Impact of Prenatal Care
- Maternal Health Prior to Pregnancy is Key
- It will Take More Than One Generation to Equalize Birth Disparities
- Calls for Clinical & Public Health Interventions that are more Longitudinally and Contextually Integrated
- Transition Must be Made from Strictly Clinical Approaches to Practice to Integrate a Social Determinants of Health Focus to Practice

Traditional Perinatal Care Continuum



Longitudinal Approach





New MCH Life Course Continuum Axis 1

Centering Pregnancy	Child Abuse Prevention	Latch-Key Program	Managing Relationships	Health Policy Activities	Reproductive Social Capital	Harlem Weight Watchers
Internatal Care	School Readiness	Fitness & Health Activities	Pregnancy Prevention	Women's Health Protocol	Depression Group Work	Women's Health Protocol
Perinatal Care	UPK	Beacon School	College Prep	Perinatal Care	Reproductive Life Planning	Specialty Care
Harlem Birthing Center	Early Head Start/ Head Start	Health/ Life Stories Telling	Preconception Inter-conceptual Care	Chronic Disease	Chronic Disease Management	Chronic Disease
Birth	Early Childhood	Pre-Teen	Teen	Young Adult	Women>35	Senior Citizens

Social Determinants of Health





MCH Life Course Organization

Social Determinants of Health Axis 2

Public Policy Initiatives		Economic Empowerment Zone	Supermarket Zone Expansion Policy	NYC Affordable Housing Policy
Community Environmental Impact		St. Nick Tenant Organizing	Food & Fitness Coalition	Affordable Housing Organizing
Organizational Impact		Healthy Start Consortium	Diabetes Prevention Coalition	Harlem Works Job Readiness
Group/ Interpersonal Impact		Centering Pregnancy	Baby Mama's Club	Consumer Involvement Organization
Individual Impact		OB/GYN Medical Homes	Case Management	Depression Screening & Treatment

NMPP's Individual/Clinical Life Course Interventions

- Central Harlem Healthy Start Program
- Nurse Family Partnership, (NYCDOH/MH)
- Community Health Worker Program
- Harlem Hospital Birthing Center
- St. Nicholas Child Welfare Preventive Program
- Mankind Fatherhood Case Management Program
- Baby Steps Home Visiting Program (Healthy Families America Model)
- TASA Cobra Case Management Program for Pregnant Teens

NMPP's Individual/Clinical Life Course Interventions

- Start Right Immunization Team
- Center for Preschool & Family Learning Head Start-152nd St.
- Center for Preschool & Family Learning Head Start-155th St.
- Universal Pre-K Program-152nd St.
- Universal Pre-K Program-155th St.
- Managed Care/Healthcare Enrollment Program
- Asthma Case Management Team



**time to
register
your child
now!**

**The Center for Preschool
and Family Learning
Headstart/UPK**

**Half Day Universal Pre-K
1854 Amsterdam Avenue
New York, NY 10031**

(212) 694-1740

The Center for Preschool and Family Learning Head Start takes pride in the services we provide to our children and their families. We offer a high quality early childhood learning program to children ages three to five years old, and social services support for the families if needed.



Our classrooms are staffed with a group teacher and one assistant teacher. We strongly encourage parents to be involved in their child's headstart experience. Our parents volunteer on a weekly basis in classrooms, on trips and for parent meetings.

Sponsored by Northern Manhattan Perinatal Partnership, Inc.
Creative services provided by NMPP's Social Health Marketing Group
212 665-2600 x308 / Back CatDesign 718 753-0214

FREE!

Registering children born in the year

2002

Universal Pre-K

Universal Pre-K Sessions

Morning Session

8:30 am - 11:00 am

Afternoon Session

12:00 pm- 2:30 pm

- Dental and Mental Health Services
- Speech and Hearing Testing
- Individualized Teaching Program
- Mandatory Parent Involvement
- Services for Children with Special Needs
- Snacks and Meals Provided

NMPP's Group/ Interpersonal Interventions

- Baby Mama's Club/Circulo de Mamas Depression Groups
- Centering Pregnancy
- Adolescent Pregnancy Prevention Team
- Harlem Weight Watchers Program
- CHHS's Consumer Involvement Organization

Summer 2006

\$10.00 per copy

“COLLARD GREENS for the GHETTO SOUL”

**Women Telling their Stories of
Hope, Encouragement and Inspiration**

**NORTHERN MANHATTAN PERINATAL PARTNERSHIP
CENTRAL HARLEM HEALTHY START PROGRAM
127 West 127th Street
3rd Floor
New York, N.Y. 10027**



NMPP's Organizational Life Course Interventions

- CHHS Consortium
- NYC Male Involvement Consortium
- Comprehensive Prenatal/Perinatal Network
- Harlem Child Welfare Network
- Casey Powerful Families Training Program
- Harlem Health Promotion Center
- Sisterlink Coalition (CDC Funded)

NMPP's Community Environmental Life Course Interventions

- NMPP's Harlem Works Job Readiness Program
- NYC Breastfeeding Alliance
- Harlem Strategic Action Committee
- ABC Asthma Coalition
- Start-Right Immunization Coalition
- St. Nicholas Houses Community Organizing Project

NMPP's Public Policy Life Course Interventions

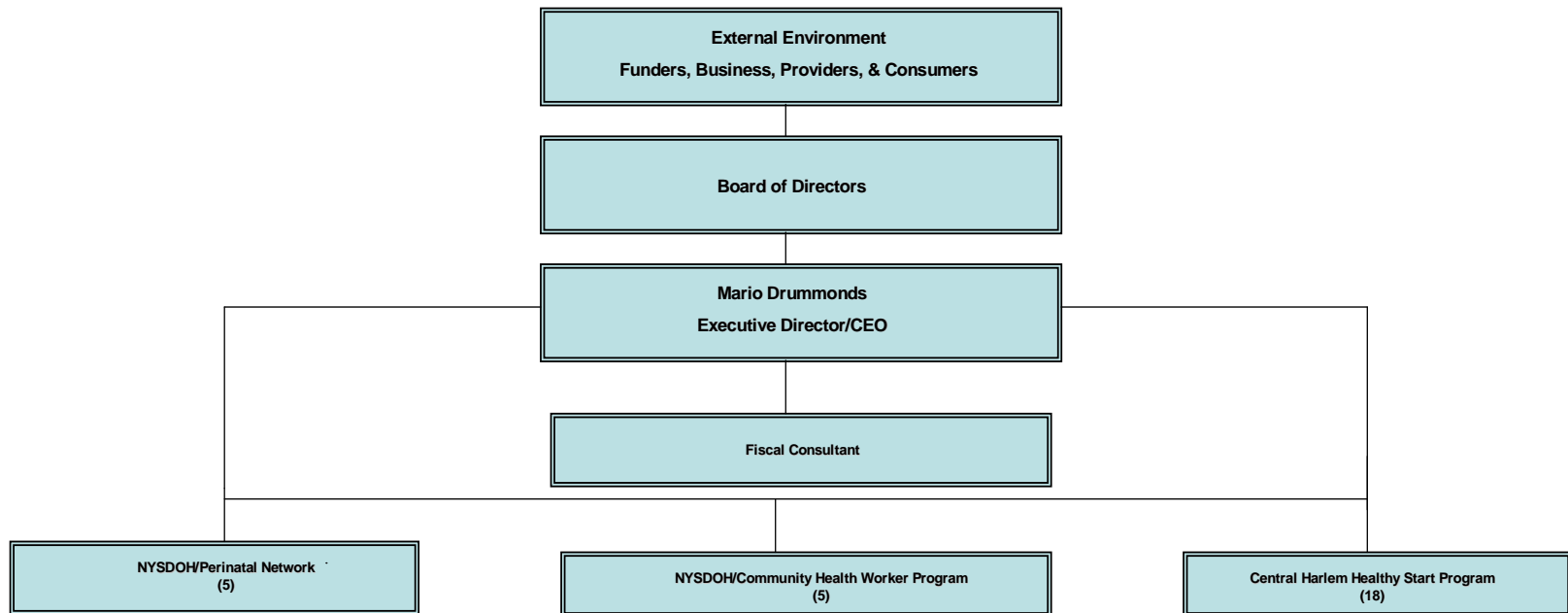
- Federation of County Networks
- Harlem Food & Fitness Consortium
- Citywide Coalition to End Infant Mortality
- Manhattan Regional Perinatal Forum
- NMPP's BBKH Diabetes Coalition

NMPP 1995

NORTHERN MANHATTAN PERINATAL PARTNERSHIP, INC.

MANAGERIAL/PROGRAM CHART for 1995

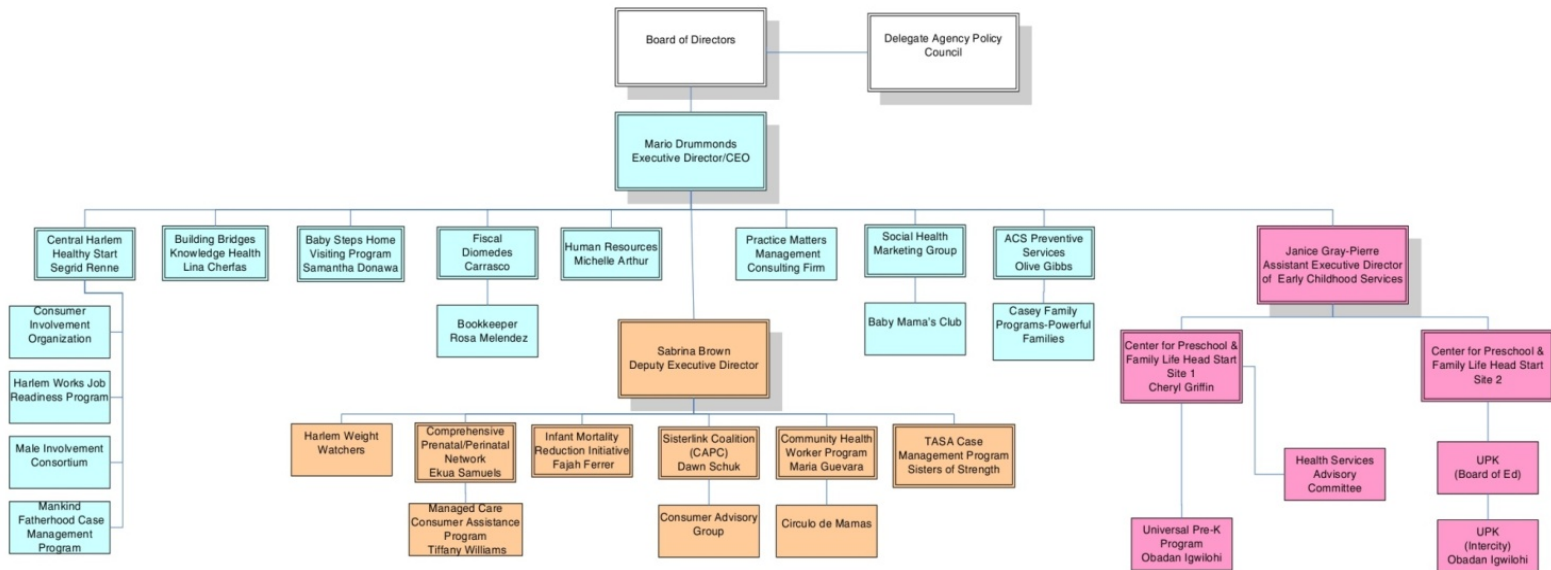
SUSTAINABILITY as ORGANIZATIONAL STRATEGIC INTENT



NMPP/ MCH Life Course Organization

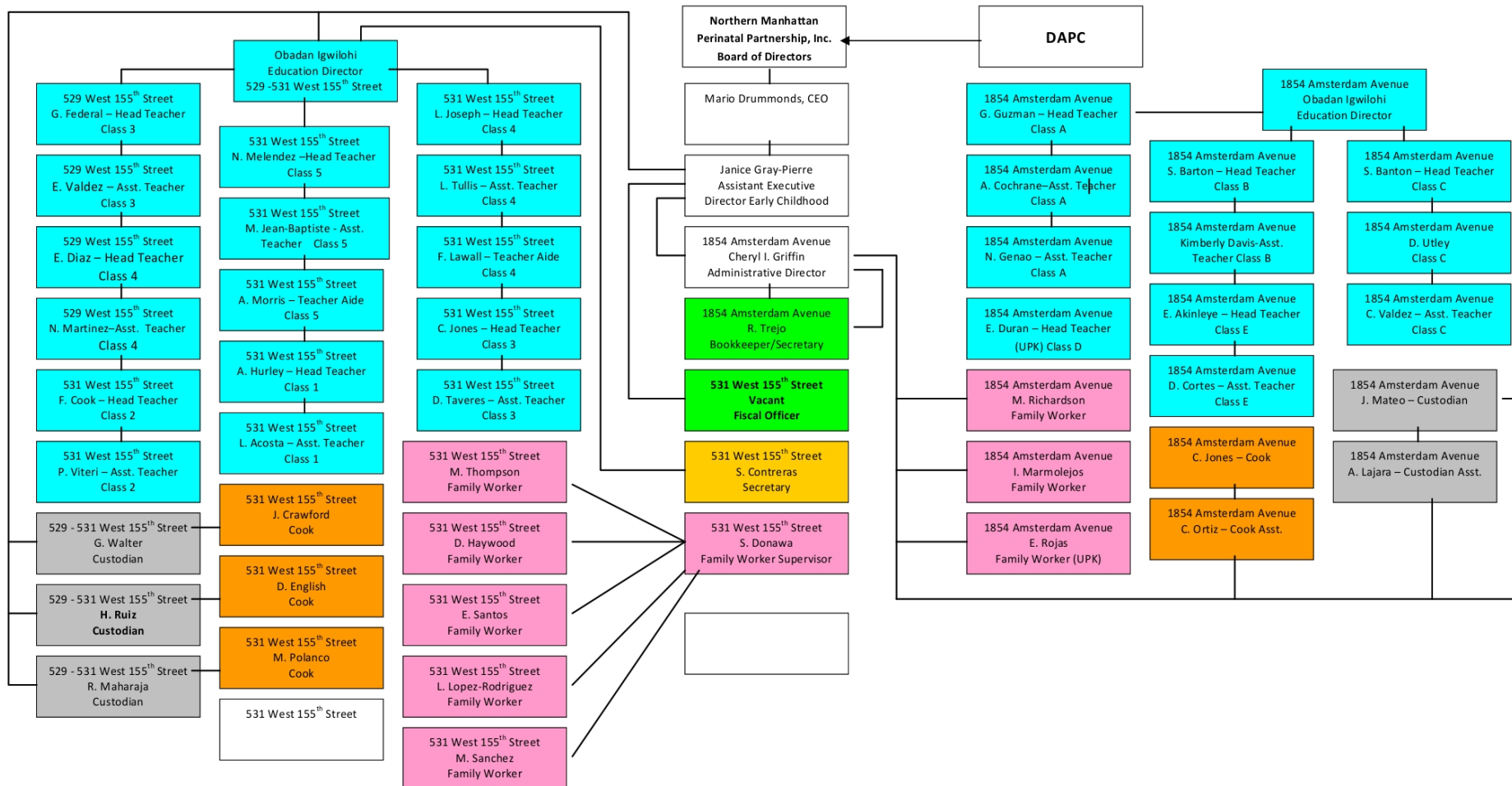
2010

Northern Manhattan Perinatal Partnership, Inc. - Organizational Chart



Head Start 2010

THE CENTER FOR PRESCHOOL AND FAMILY LEARNING HEAD START (Sponsored by Northern Manhattan Perinatal Partnership, Inc.)



Public Policy & Systems Change Achievements

1. Regionalization of Perinatal Care Throughout NYS
2. Secured Over \$70 Million Dollars from NYC Mayor
3. Integrated MCH & Child Welfare Systems of Care
4. Financed & Staffed Up Birthing Center at Harlem Hospital
5. Secured \$250 Million Dollars to Build a New Harlem Hospital

Public Policy & Systems Change Achievements

6. Harlem Hospital Recently Designated as a “Baby Friendly” Hospital (Aug 2008)
7. Passed Mental Health Parity Legislation Timothy’s Law (2007)
8. Trained over 800 women and placed them in full time jobs!
9. Reduced Child & Abuse & Neglect Rates in Harlem
10. Repealed “Medicaid Neutrality” Law in NYS

Public Policy & Systems Change Achievements

11. Increased Medicaid Mental Health Reimbursement Rates
12. NYC Mayor Has \$7.5 Billion Dollar Plan to Build 165,000 Units of Affordable Housing by 2013- Eighty-Two Thousand units built to date!
13. Mayoral \$10 million dollar Plan to train 400 Harlem residents to become RN's and LPN's
14. Congressman Rangel's Harlem Empowerment Zone
15. Legislation to move from a minimum wage to a livable wage policy

Public Policy & Systems Change Achievements

- 16. Moving Harlem Residents into Union Jobs
- 17. Created More Micro-Lending Programs to Spur Business Ownership by Poor & Working Class Women in Harlem

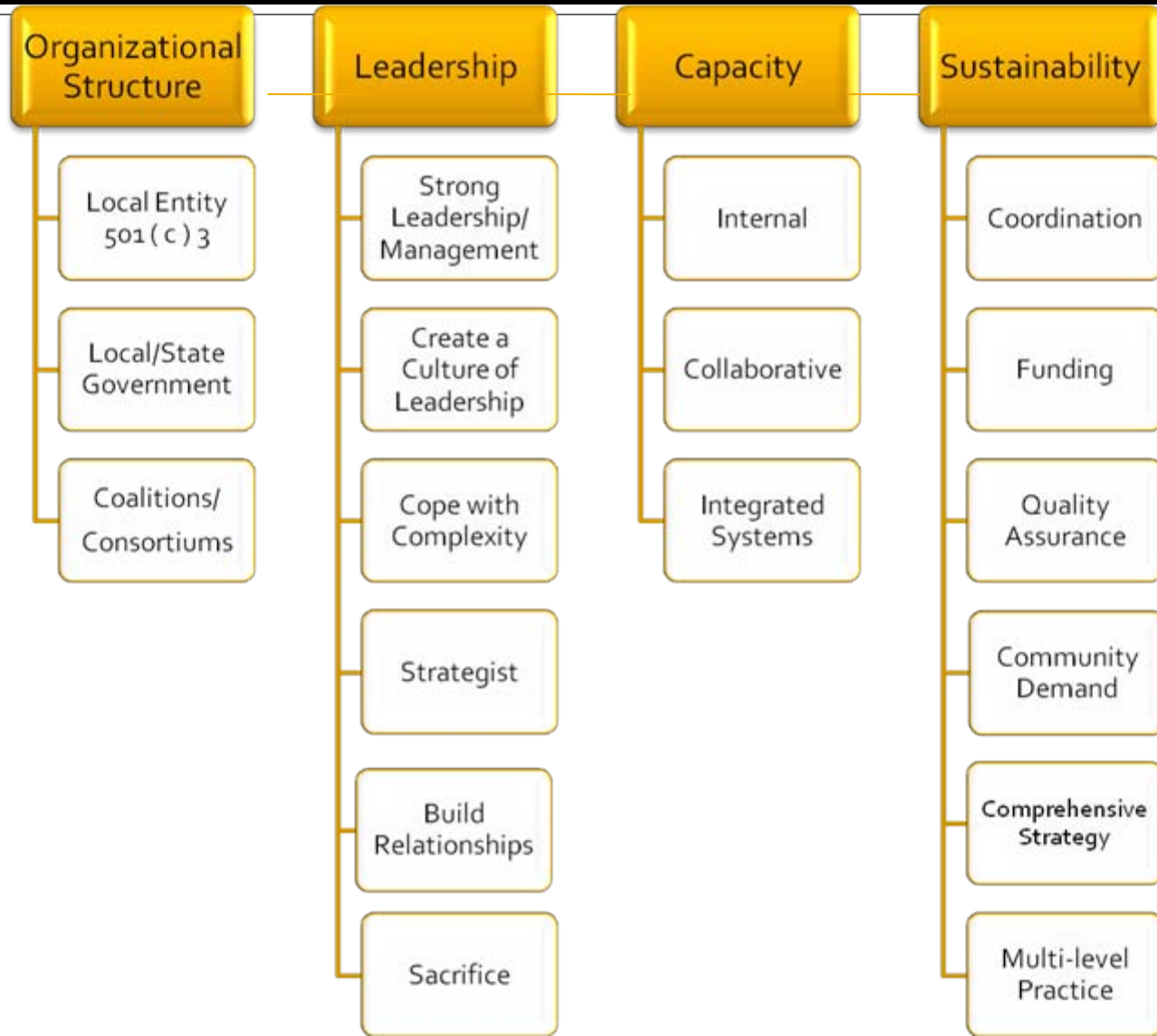
Working Definition of a MCH Life Course Organization

A MCH Life Course Organization is an entity (local/state) that develops the capacity over time to deliver integrated, continuous and comprehensive health and social services and support to women and their family members from the womb to the tomb.



MCH Life Course Organization

Business Entity



Characteristics of a Life Course Organization

- Builds **programmatic capacity** within the agency at each stage of a woman's life course to manage her health over the life course (Axis 1).

Characteristics of a Life Course Organization Cont'd

- **Swims up-stream** from individual interventions and designs strategies and actions at the group, organizational, community and policy levels to transform social determinants to poor health (Axis 2).

Characteristics of a Life Course Organization Cont'd

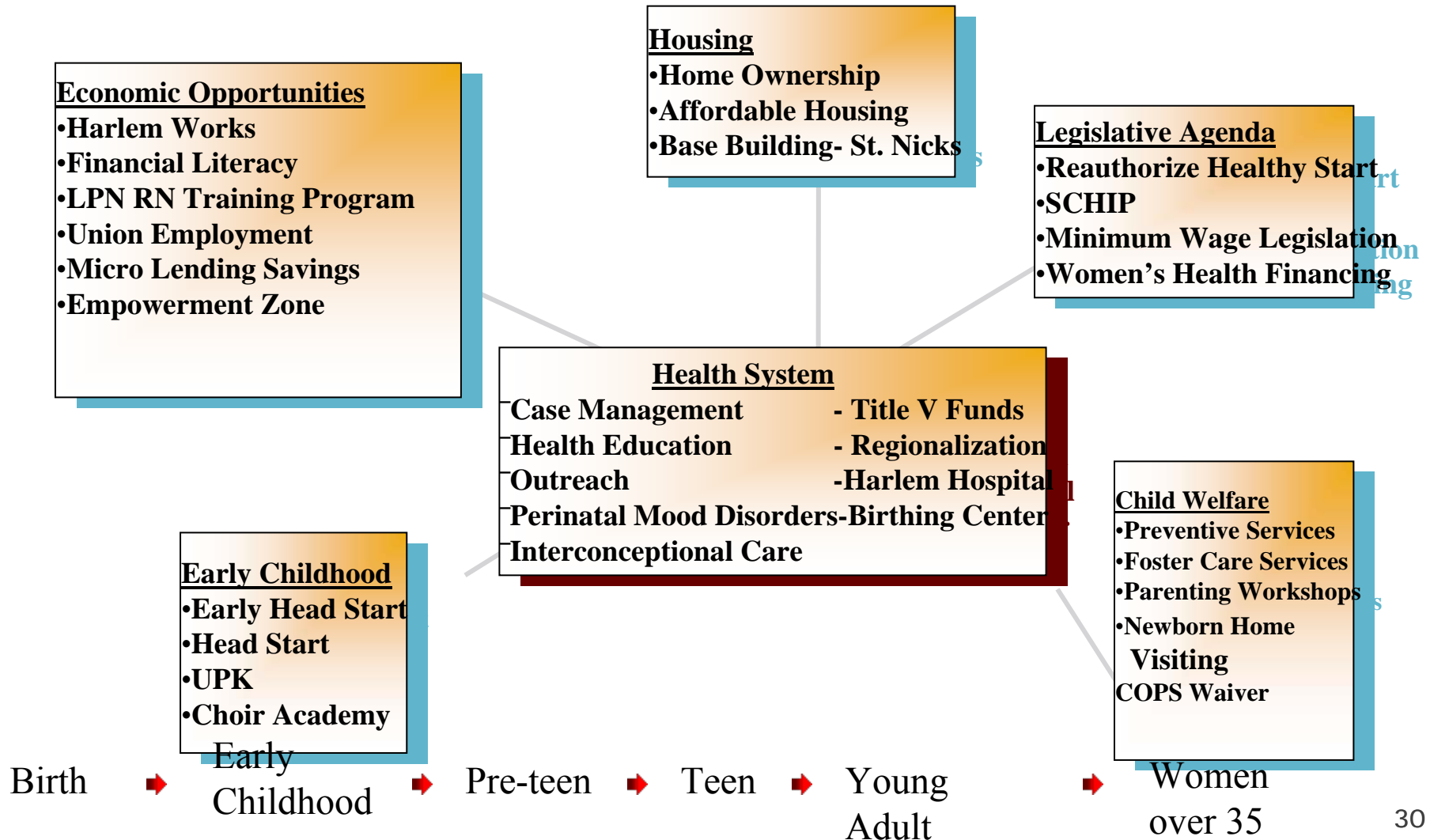
- If unable to build internal capacity **collaborates** with outside agencies and systems to create an integrated system of care to manage a woman's health.

Characteristics of a Life Course Organization Cont'd

- Unlike many maternal and child health programs that only seek to influence the health system by developing and executing a local health system action plan, a MCHLCO **seeks to influence and lead their local and regional economic, political, housing, child welfare, early childhood and middle school systems of care.**

Spectrum of Work for MCH Life Course Organization

Building Public Health Social Movement



MCH Life Course Organization Examples



Northern Manhattan Perinatal Partnership, Inc. Sisterlink Initiative

- Harlem, New York
- Mario Drummonds, MS, LCSW, MBA



South Madison Health & Family Center - Harambee

- Dane County, Wisconsin
- Paul Soglin



DC Developing Families Center

- Ward 5, District of Columbia
- Dr. Lubic & Dr. Randolph

Emerging MCH Life Course Initiatives

Contra Costa Health Services

- Cheri Pies, MSW, Dr PH, Director
- Family, Maternal, and Child Health Programs-- 15-year Life Course Initiative

Alameda County Public Health Department

- Anita L. Siegel, RN, MPH, Acting Director
- Building Blocks Initiative-- 15-year Building Block Initiative

Wisconsin Partnership Program

- Lorraine Lathen, MS
- The Life Course Initiative for Healthy Families

Dane County African American Infant Mortality Decline 1990-2007

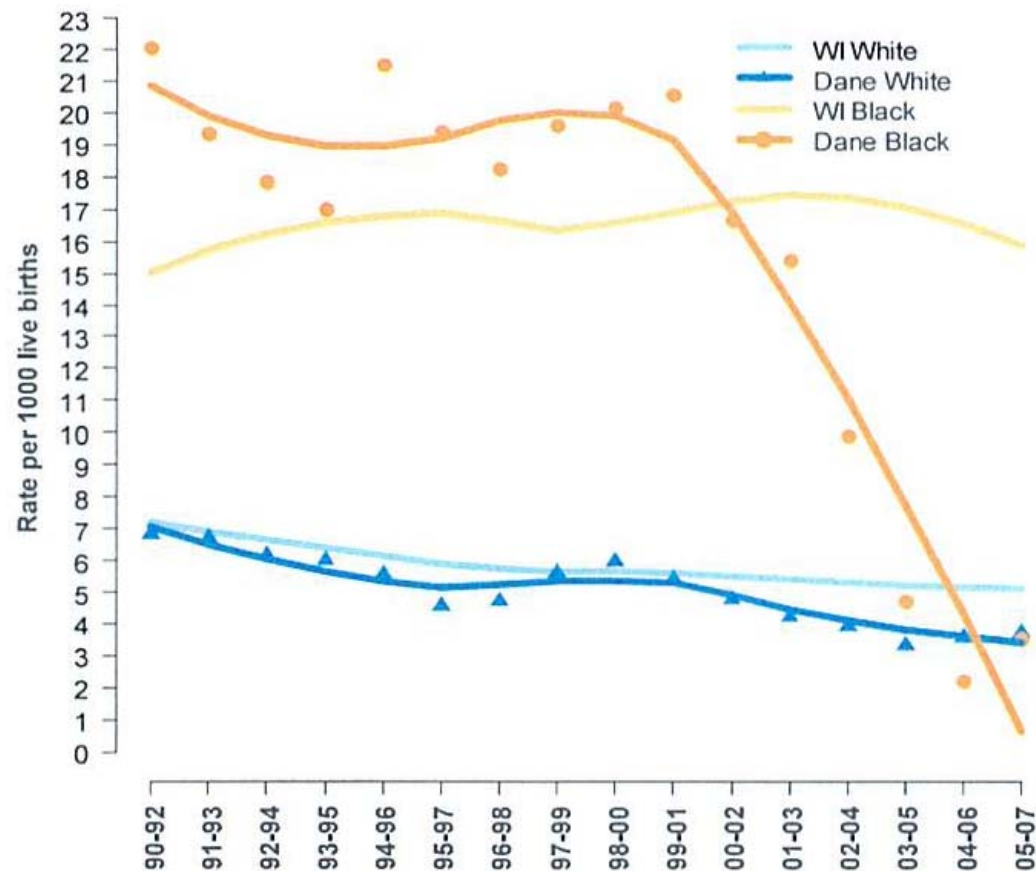
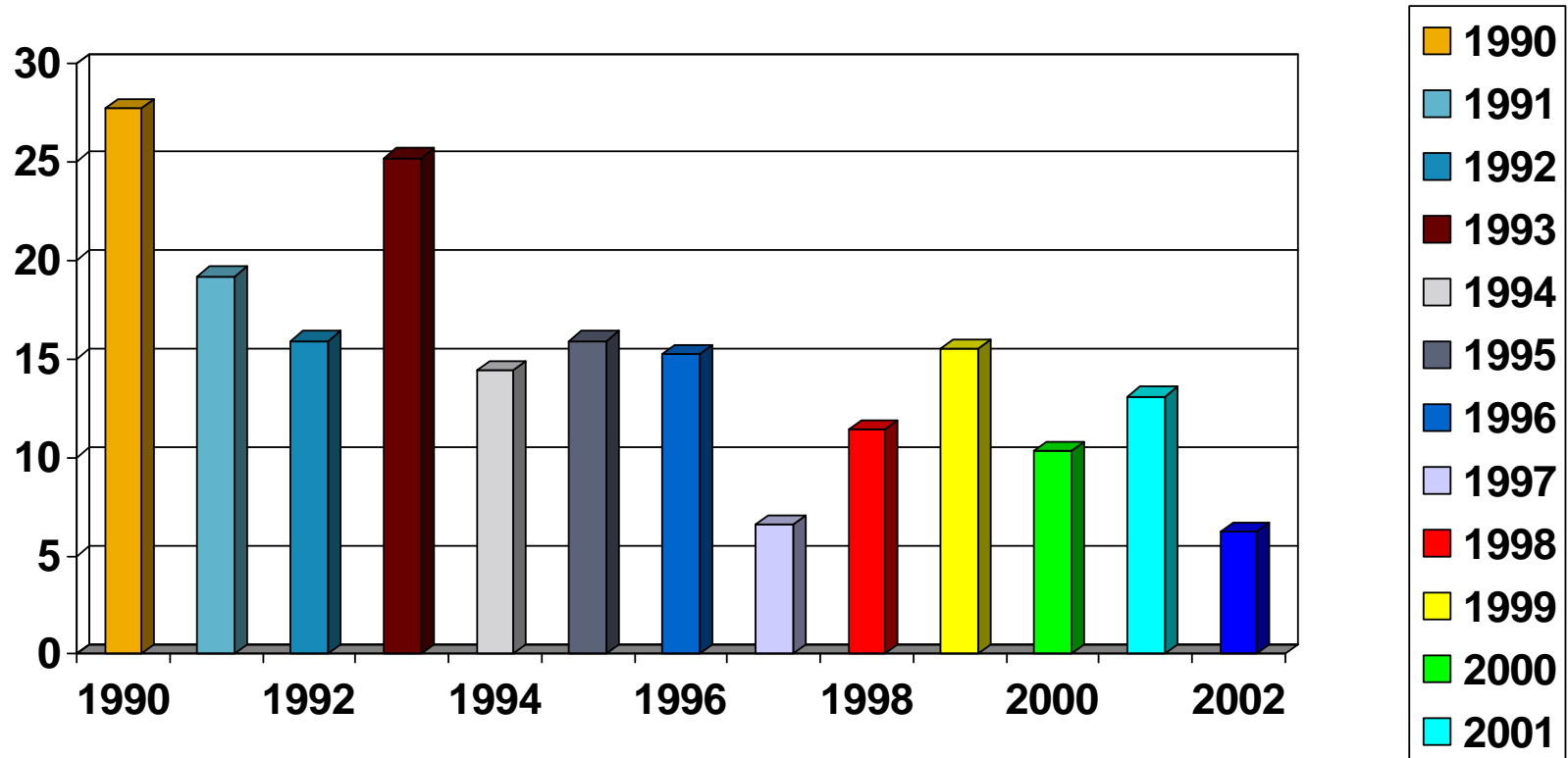


Figure 1 Infant Mortality for Dane County and Wisconsin, 1989 To 2007

Central Harlem Infant Mortality Rate



September 13, 2006
Bureau of Vital Statistics
New York City Department of Health and Mental Hygiene

Infant Deaths and Infant Mortality Rate by Health Center District of Residence New York City, 2001-2008

Health Center District	2001 IMR	2002 IMR	2003 IMR	2004 IMR	2005 IMR	2006 IMR	2007 IMR	2008 IMR
New York City	6.1	6.0	6.5	6.1	6.0	5.9	8.1	5.5
Central Harlem	13.1	6.2	7.3	5.1	7.4	11.0	8.0	6.1
East Harlem	7.8	8.3	5.0	5.5	3.6	5.0	8.4	6.0
Washington Heights	5.5	4.2	7.3	5.9	4.5	3.8	2.8	4.3

Central Harlem MCH Life Course Organization

Birth Outcome Improvements

	1990	2004	2007	2008
Infant Mortality Rate	27.7	5.1	8.1	6.1
Low Birth Weight %	19.5	11.1	10.8	11.7
First Trimester Prenatal Care Entry %	48	89.5	92	-

Secretary's Advisory Committee on Infant Mortality 2002

Report on the Future of Healthy Start Why Direct Practice Interventions are not Enough

“...Healthy Start Interventions are Inherently Limited in Their Focus and Cannot Change Systemic Structures Such as Insurance Coverage, Hospital Practices, Unemployment, Poverty and Violence in the Community... It is Unrealistic to Expect that Community Coalitions and Case Management can Impact Infant Mortality Rates.

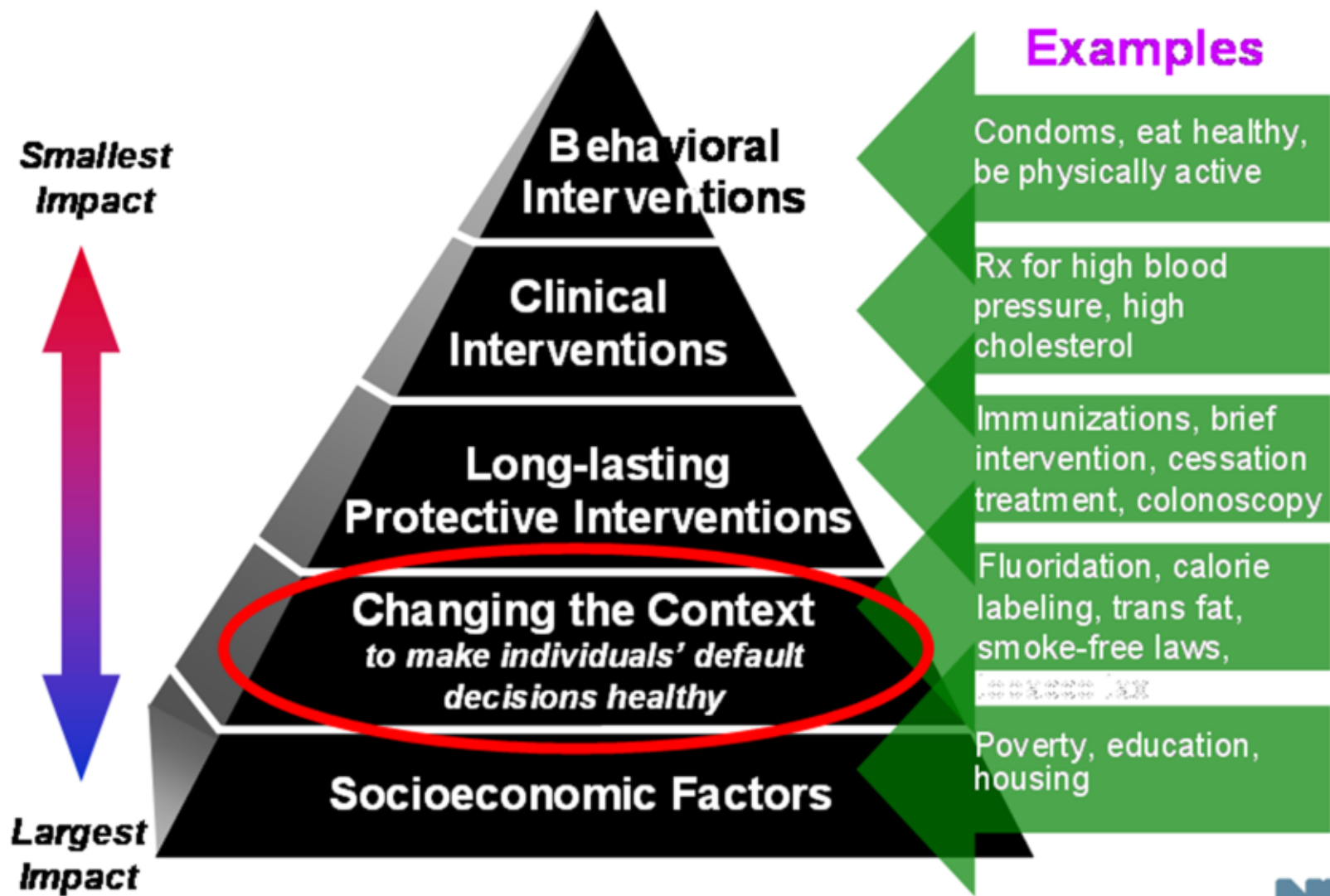
Secretary's Advisory Committee on Infant Mortality 2002

Report on the Future of Healthy Start

Why Direct Practice Interventions are not Enough

In Summary, Healthy Start Interventions Implemented in the Demonstration Phase could not be Expected to Impact on Infant Mortality Rates Unless Other Systemic Changes Which Remove Barriers to Care had been Made at the Same Time.

Interventions Affecting Health



A woman in a dark grey business suit is climbing a silver metal ladder. She is looking through black binoculars. The background is a bright blue sky with wispy white clouds. The ladder is positioned on the left side of the frame, and the woman is leaning against it with her right hand while holding the binoculars with her left hand.

Public Policy Initiatives

**Community/
Environmental Impact**

Organizational Impact

Group/Interpersonal Impact

Individual Impact

**SO WHAT ABOUT
PHILADELPHIA?**

Life Course Approach to Women's Health

Assessment Tool- City of Philadelphia

Social Determinants of Health	Public Policy Initiatives							
	Community/ Environmental							
	Organizational							
	Group/ Interpersonal							
	Individual							
		Birth	Early Childhood	Pre-teens	Teens	Young Adult	Women ≥35	Seniors

Internal Assessment



Build Internal Programmatic Capacity

Develop working committees to:

1. scan the internal environment within your organizations to research and then select a variety of program development opportunities or interventions that support the life course framework.

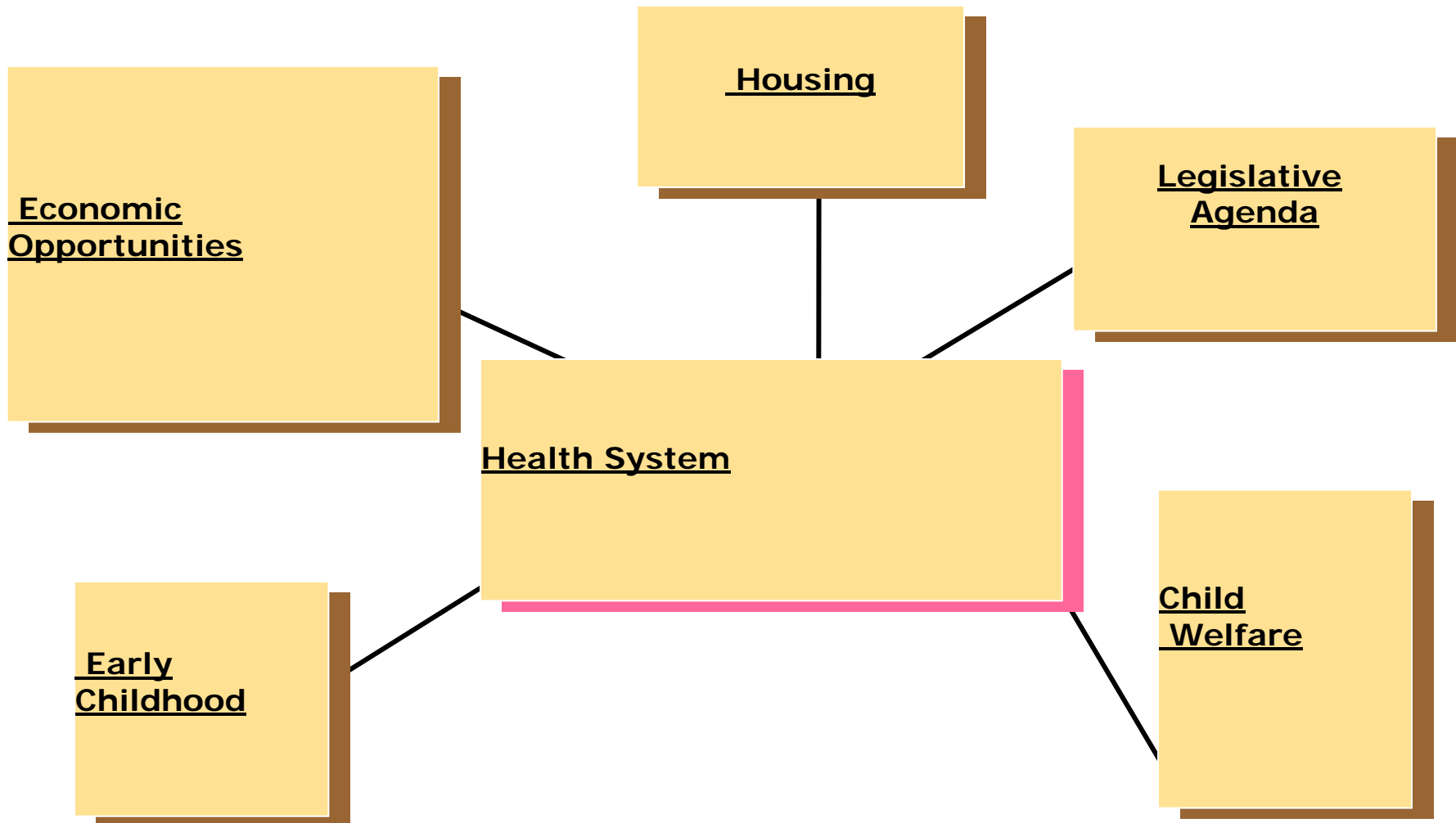
Build External Capacity

2. Scan the external environment to research and then select a variety of program development funding opportunities to expand the service offerings of the MCH Life Course Organization.

Life Course as a Health Development Model



Spectrum of Work for MCH Life Course Organization City of Philadelphia



System Transformation Strategies

1. Base Building at St. Nicholas Houses-Promise Neighborhood- Innovation Community
2. Integrating MCH/Child Welfare/Early Childhood Systems of Care
3. Developing MCH Chronic Disease Strategies
4. Developing an MCH Poverty Strategy
5. Regionalization of Perinatal Care
6. Building Harlem Birthing Center

POURING THE FOUNDATION FOR CHANGE: BASE BUILDING WITHIN ST. NICHOLAS HOUSING DEVELOPMENT

- CHILD WELFARE & INFANT DEATH DATA
REVIEW: ZIP CODE 10027
- HARLEM CARVE OUT
- DIRECT MAIL CAMPAIGN
- DOOR-TO-DOOR CAMPAIGN
- PHONE-FOLLOW-UP WORK



Image © 2007 Sanborn
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Google



Pointer 40°48'42.10" N 73°56'52.64" W elev 28 ft Streaming ||||| 100%

Eye alt

POURING THE FOUNDATION FOR CHANGE: BASE BUILDING WITHIN ST. NICHOLAS HOUSING DEVELOPMENT

- DATABASE DEVELOPMENT-CASE
REFERRALS
- CONCENTRATION OF CLINICAL CAPACITY
- SURGE STRATEGY CLINICAL OUTCOMES
- DISASTER RECOVERY/CIVIL
DEFENSE/EMERGENCY PREPAREDNESS
READY

POURING THE FOUNDATION FOR CHANGE: BASE BUILDING WITHIN ST. NICHOLAS HOUSING DEVELOPMENT

- LIVING LABORTORY/MCH BASE AREA
BUILT
- HARLEM CHILDREN'S ZONE/CITY HEALTH
DEPARTMENT FOLLOWS OUR LEAD

We Are ACS



Poster created by NHP's Social Health Marketing Group

We are **Active Community Servants** to end child abuse and neglect in Harlem. We are not here to remove your children and place them in the foster care system. We are community members charged to help you care for your children and keep your family together!

We are prepared to anticipate, recognize and appropriately react to a family experiencing a stressful situation that might negatively impact on a child. **Better Days** are about to arrive! Reinforcements are on the way because love can build a bridge.

If you are experiencing difficulties caring for your child, we are your next door neighbors in the Saint Nicolas Housing Development. Knock on our door or call the friendly and supportive staff at the **Northern Manhattan Perinatal Partnership's Saint Nicholas Family Life Support Network** at 212-665-2600, Ext. 345. **WE ARE ACS!**

Improving Social Determinants of Health

**MCH HOME
VISITING-EARLY
CHILDHOOD-CHILD
WELFARE**

INTEGRATING MCH/CHILD WELFARE/EARLY CHILDHOOD SYSTEMS OF CARE TO SAVE LIVES!

PROBLEMS/ISSUES:

***NYC'S & HARLEM'S CHILD WELFARE SYSTEM
HISTORY**

***CHILD WELFARE SYSTEM & MCH SYSTEM
NEVER COMMUNICATED DESPITE SERVING
SIMILAR CASE POPULATIONS**

INTEGRATING MCH/CHILD WELFARE/EARLY CHILDHOOD SYSTEMS OF CARE TO SAVE LIVES!

- *LOCAL & NATIONAL CHILD WELFARE DATA SETS REVEALED THAT CHILDREN 0-5 ARE MOST AT RISK FOR ABUSE
- *NYC ADMINISTRATION FOR CHILDREN SERVICES DID NOT HAVE THE CORE COMPETENCIES TO SERVE THIS POPULATION ALONG WITH PREGNANT TEENS IN THE SYSTEM

INTEGRATING MCH/CHILD WELFARE/EARLY CHILDHOOD SYSTEMS OF CARE TO SAVE LIVES!

*NOVEMBER 23RD 2004, NMPP ORGANIZED A
FORUM WITH THE TWO LEADERS OF OUR MCH
AND CHILD WELFARE SYSTEMS IN NYC

*OUR TASK WAS TO DEVELOP A PERINATAL
FOCUS TO CHILD WELFARE PRACTICE

Treating Child Abuse/Infant Deaths at its Roots: Integrating Child Welfare and Maternal & Child Health Services in New York City A Policy Conversation in Harlem

John B. Mattingly
Comissioner of ACS

November 23, 2004

Mary Travis
Bassett, M.D., M.P.H.
Deputy Commissioner, New York City
Department of Health and Mental Hygiene



Northern Manhattan Perinatal Partnership

127 West 127th Street
3rd Floor Conference Area
9:30 am - 12:00 pm
Seating Is Limited

FREE!!!

Obtain a status report on the Central Harlem Healthy Start Program and learn about the future of Healthy Start in Harlem.

For more information call Ron Turner at 212 665-2600 ext 306.

Co-Sponsors: NMPP's Sisterlink Coalition, Center for Preschool Family Learning Head Start, St. Nicholas Family Life Support Network Preventive Program, Baby Steps Home Visiting Program

Creative services developed by NMPP's Social Health Marketing Group (212) 665-2600/Black Cat Design (718) 753-0244

INTEGRATING MCH/CHILD WELFARE/EARLY CHILDHOOD SYSTEMS OF CARE TO SAVE LIVES!

RESULTS:

*TWO SENIOR STAFF MEETINGS WERE PLANNED BETWEEN BOTH AGENCIES TO EXPLORE WAYS TO WORK TOGETHER

*AS A RESULT OF OUR BRIDGE WORK, ACS AGREED TO ALLOW THE MCH COMMUNITY'S HEALTHY START, HEALTHY FAMILY AMERICA'S HOME VISITING AND NURSE FAMILY PARTNERSHIP PROGRAMS TO MANAGE THE CASES OF BIOLOGICAL MOMS WHO HAD CHILDREN IN CARE 0-5

INTEGRATING MCH/CHILD WELFARE/EARLY CHILDHOOD SYSTEMS OF CARE TO SAVE LIVES!

*A COPS WAIVER WAS SUBMITTED TO OUR NYS OFFICE OF CHILDREN & FAMILIES AGENCY THAT RAISED OVER TEN MILLION DOLLARS TO FUND THE COLLABORATION

*NYCDOH/MH AGREED TO MAKE TWO VISITS TO ALL BIOLOGICAL PARENTS OF CHILDREN 0-5 WHO WERE EITHER IN OUR FOSTER BOARDING HOME OR PREVENTIVE SYSTEMS THROUGH THEIR NEW BORN HOME VISITING MODEL

INTEGRATING MCH/CHILD WELFARE/EARLY CHILDHOOD SYSTEMS OF CARE TO SAVE LIVES!

*BOTH AGENCIES SIGNED A MOA TO INTEGRATE THEIR DATA SYSTEMS TO MONITOR SIMILAR CLIENTS, MONITOR QUALITY AND REDUCE DUPLICATION OF CARE

*AS A RESULT OF THIS WORK, THE NUMBER OF CHILDREN ENTERING CHILD WELFARE SYSTEM FROM HARLEM DECLINED BY 20%

Selected Child Welfare Trends, Central Harlem 2002-2005

Year	2002	2003	2004	2005
Abuse/Neglect Reports	1574	1354	1200	1208
Number of Children In Reports	2478	2032	1855	1846
Abuse/Neglect Indication Rates	45.0%	39.4%	37.9%	45.9%
Number of Children in Indicated Reports	973	649	745	885
Victimization Rates *	32.8	21.9	19.4	24.7
Number of Placements	449	285	228	192
Number of Children Placed	447	279	220	192
Number of Families Placed	288	198	161	146
Placement Rate **	15.1	9.6	7.4	6.5

Source: NYC Administration for
Children's Services: Office of
Management Analysis

•Victimization Rate is the number of children with indicated abuse/neglect per
thousand youth 17 and under in the population.

Improving Social Determinants of Health

Ties that Bind: MCH's Role in Preventing Chronic Diseases

Problem Analysis:

- Close to 1 million New Yorkers are Diabetics
- Over 40,000 women in NYC have Gestational Diabetes
- 10 to 15% of the Adult Population in Harlem & South Bronx Diabetic & Obese
- Death Rate due to Diabetes in NYC is three times higher for African Americans and two times higher for Latinos
- Recent NYCDOH Study Revealed that 43% of NYC's School Children are Overweight

MCH/Chronic Disease Solutions

- Restructured all Six MCH Home Visiting Programs
Pregnancy Care to Interconceptional Care (2004)
- Partnered with Weight Watchers to Organize First
Program in Harlem (2004)
- Partnered with Mailman School of Public Health to
conduct a Study that Explored the Relationship
between Maternal Weight- Obesity & Low Birth Weight
(2005-2007)

MCH/Chronic Disease Solutions

- Formed BBKH Diabetes Coalition with NY Presbyterian Hospital (2004)
- BBKH Goal: By 2012 Build a Public Health Social Movement to Reduce Growth of Diabetes by 5% in Harlem & South Bronx
- Secured Five-Year Funding Commitment from NYSDOH (2006)
- Implemented Spectrum of Care Strategy to Achieve Public Health Goal

POVERTY REDUCTION STRATEGY

**CREATING A VISION BEYOND WELFARE,
DEVELOPING WORKING CLASS HEROES-
MOVING WOMEN INTO THE MIDDLE
CLASS**

**BEING POOR IS HAZARDOUS TO A
WOMAN'S HEALTH**

Case Level Interventions:

**Harlem Works Job Readiness Program -
1997 & Beyond**

**Powerful Families Financial Literacy/Assets
Building Program –Casey Family Programs
funded**

**NMPP's Education Strategy Extended at
Harlem Choir Academy**

NYC Level Interventions:

NYC Mayor Bloomberg's Poverty Campaign: Center for Economic Opportunity-Last Year Our Mayor Declared War On Poverty and Allocated 150 million a Year to Develop Internal Agency-Public-Private Solutions to Spur Economic Opportunities and Financial Independence

September, 2006

INCREASING OPPORTUNITY AND REDUCING POVERTY IN NEW YORK CITY

NYC Level Interventions:

**THE MAYOR CHARGED EVERY
COMMISSIONER TO TAKE 5% OF THEIR
ANNUAL BUDGET AND ALLOCATE TARGETED
TO THE ANTI-POVERTY STRATEGY**

NYC Level Interventions:

CONDITIONAL CASH TRANSFER PROGRAM:

Mayor's Affordable Housing Strategy- 7.5 Billion
Allocated to Preserve and Build 165,000 units of
affordable housing by 2013 in poor communities
like Harlem, the South Bronx & Bedford
Stuyvesant –Forty-Seven Thousand Unit Built to
Date

Moving Participants into Union Jobs

NYC Level Interventions:

Registered Nurse & LPN Career Ladder Training Program- Train 400 poor and working class New Yorkers to become nurses! Ten Million Dollars Allocated to Fund this Program-Guaranteed Placement at HHC Facility Making up to 37,000 for LPN or \$62,000 for an RN

Micro-Lending Program Spurs Business Ownership

State & National Policy Initiatives:

Congress Rangel's Harlem Empowerment Zone/Enterprise Community Impact

Moving from a Minimum Wage to a Livable Wage Policy 1997-\$5.15 TO 7.25 TO 10.25 per Hour

Policy Implications

Life Course Perspective

- Cost effective
- Continuum of care
- Higher levels of women's wellness
- Disease prevention
- Comprehensive health promotion
- Addresses socio-economic and environmental health disparities

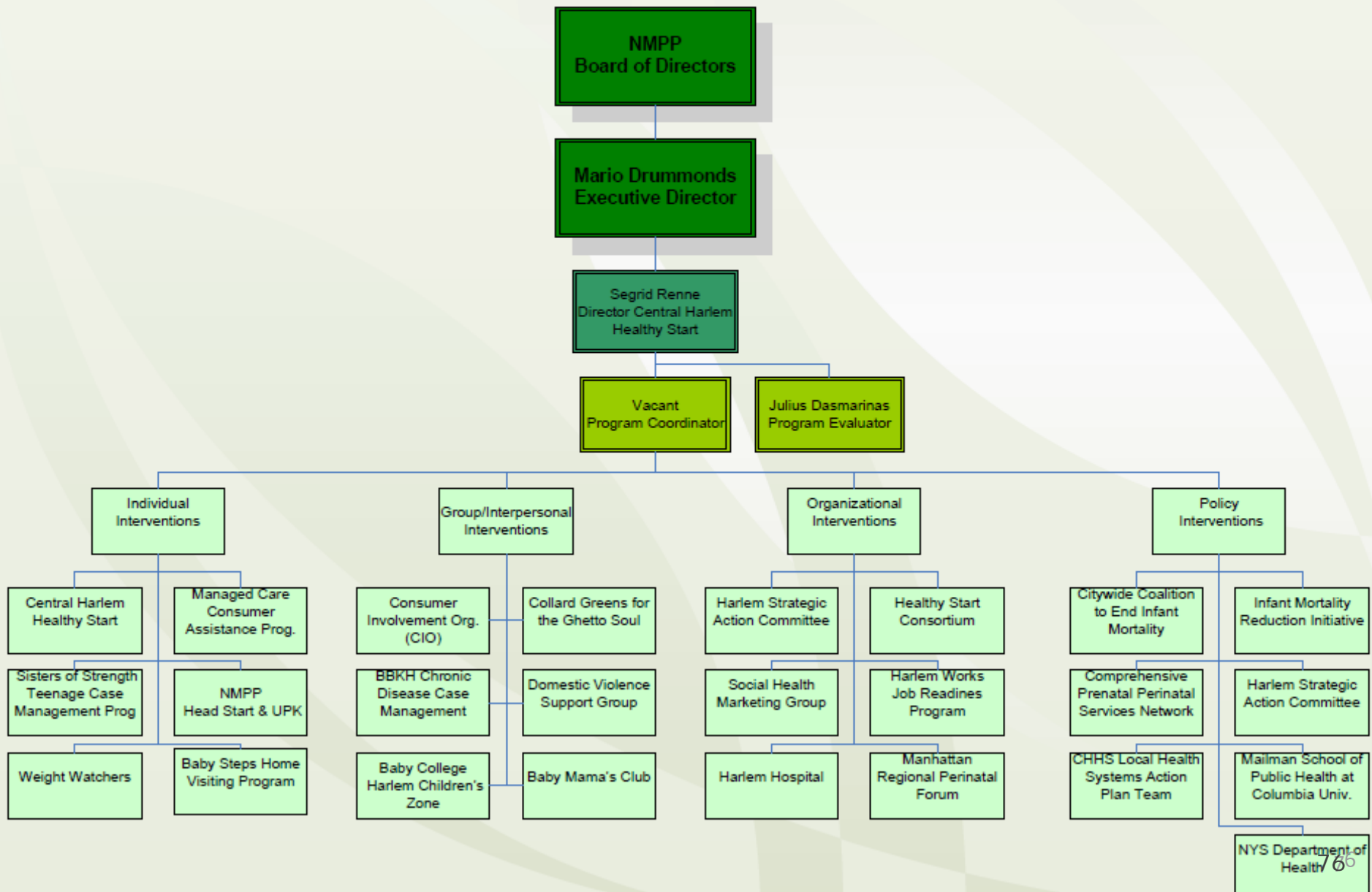
Traditional Healthcare

- High healthcare costs
- Fragmented silo system
- Shift from women as a reproductive vessel
- Disease management
- Emphasis on clinical care
- Focus on Individual behavior

Northern Manhattan Perinatal Partnership, Inc.

Center for Women's Health, Wellness & Development

Organizational Chart



Strategic Leadership

NMPP believes that Leadership is the self-defined capacity to communicate vision and values while providing programs, structures and core services that satisfy human needs and aspirations while transforming people, your organization and society in the process.

Strategic Leadership

- **Strategic Intent** is based on a bold premise that leadership can exercise control over the future of the organization and can invent the future that it desires and not merely respond to what happens.

Strategic Leadership

- While politics is the art of the possible, leadership is the art of making the impossible come true. Leaders play a central role in constructing an agency's strategic intent that represents an ambition that stretches far beyond the current resources and capabilities of the firm.

Strategic Leadership

- Agencies that create the future are rebels; they're subversives. They break the rules! They dream of things not yet created!

Achieving Health Equity by: Building a Social Movement, Investing in Ideas, Executing Tasks, Returning Results!



Linking Women to Health, Power and Love Across the Life Span

For more information contact:

Mario Drummonds, MS, LCSW, MBA

Executive Director/CEO

Northern Manhattan Perinatal Partnership

127 W. 127th Street

New York, NY 10027

(347)489-4769

mdrummonds@msn.com