SUMMARY STATEMENT
Utah has been focused on building collaborations to reduce the preterm birth rate and improve birth outcomes. Strategies include the Utah Women and Newborns Quality Collaborative (UWNQC) and the Utah Department of Health Office of Health Disparities working with public health resources, health care professionals and community partners to focus on the issue and provide education on preterm birth risk reduction.

ACTIVITIES AND RESULTS
The Utah Women and Newborns Quality Collaborative (UWNQC) is a state-wide network of professionals, hospitals and clinics dedicated to improving the health outcomes for Utah women and babies using evidence based practice guidelines and quality improvement processes. The UWNQC Preterm Birth Committee focuses on reducing the incidence of recurrent spontaneous preterm births by increasing provider discussions with eligible women on the appropriate use of progesterone. The committee, led by a board certified physician in both Obstetrics and Gynecology and the subspecialty of Maternal-Fetal Medicine consists of clinicians and public health professionals statewide. Resources developed include a Preterm Birth Prevention Video Series to educate providers and to provide resources about prevention and What to do After Preterm Birth Guide for Families, available in English and Spanish. Participating hospitals report data on progesterone with some incorporating data collection of progesterone use into their Electronic Health Record.

The Utah Department of Health (UDOH) Office of Health Disparities (OHD) pioneered efforts in data-disaggregation of their Asian and Native Hawaiian/Pacific Islander (NHPI) communities. This uncovered several birth outcomes disparities for NHPIs compared with Utah overall, including a higher rate of premature births. At that time, no health promotion interventions existed in Utah or the U.S. tailored to Pacific Islanders to address this and other birth outcomes disparities. Since 2010, the OHD in collaboration with public health and health care professionals and community partners has been working to address this issue. One product of these efforts is the It Takes a Village: Giving our babies the best chance (ITAV) project. ITAV raises awareness and educates NHPI families and community members about maternal and infant health in the context of Pacific Islander cultural beliefs and practices. Content from the workshops includes preconception health, prenatal care and birth spacing, which work towards addressing this disparity. ITAV is one of the outcomes of a birth outcomes disparities project that was originally rooted in the theoretical framework from the National Partnership for Action to End Health Disparities. In October 2018, the ITAV project became a Promising Practice in AMCHP’s Innovation Station, with the recommendation to pursue the designation of Best Practice, which the OHD is currently working toward.

Utah’s example shows that collaboration with stakeholders including clinicians and community organizations and creating resources specific to populations with birth outcome disparities has assisted with meeting the Healthy People 2020 goal of reducing preterm births to 9.4%.