

A National PHLI Story: Robert Stolarick, M.D.

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Chief, Bureau of Personal Health Services
Memphis-Shelby County Health Department



Dr. Robert Stolarick is a senior administrator with the Memphis and Shelby County Health Department. He graduated from the National Public Health Leadership Institute in 2004 and attributes his county's successful Infant Mortality Media Campaign – which was his applied leadership project for PHLI – largely to the skills and knowledge he gained through the program.

Infant mortality in Shelby County came down significantly in 2005. Even though it is still too high, it was the lowest on record in 2005 and I believe my project from PHLI had a part in that. Somehow the Memphis and the Mid-South has missed out and never had a mass media Back- to-Sleep campaign. I found some money from HRSA Maternal and Child Health dollars, about \$50,000. The people that we used to produce [the campaign] helped because they had also noticed that this was a problem. We have done a billboard campaign too. [Ours] was the first media campaign/television commercial [series] on this topic in this area. We had a high rate in Tennessee, and in Shelby County we were the highest rate [in the state].

Stolarick's project began as a sequence of television commercials addressing the problem of infant mortality due to Sudden Infant Death Syndrome, Shaken Baby Syndrome and Co-sleeping. The spots ran up to 600 times a month for 6 months. The Memphis Commercial Appeal also ran an award winning series on infant mortality. Stolarick's project and the print series generated interest in the community and State.

Mayor Wharton and Governor Bredesen convened an Infant Mortality Summit in Memphis in April, 2006. The Governor [Tennessee Governor Phil Bredesen] now has a statewide Infant Mortality program called 'One for All'... [meaning we will have] a first birthday for all babies. This is one of the first times we actually made progress on infant mortality and we made significant progress.

Gaining Confidence. Stolarick also credits PHLI for an increase in his confidence, and cites as an example his volunteering to lead the health department's response to the refugee influx after Hurricane Katrina.

Because I had sat with some bioterrorism folks at PHLI, I thought, 'Well, I can do that.' A lot of things we discussed [at PHLI] were homeland security, bioterrorism stuff, so they helped me think about what I would do. This was before we had a section like this in the health department here. The [PHLI seminar on] Risk Communication ...was greatly helpful. We opened up several shelters. We did a good job.