MARCH OF DIMES
MCH COLLECTIVE IMPACT
2022 REPORT

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In 2022, March of Dimes CI Initiatives reached 6,815 people across nine sites and actively worked with 186 partner organizations. Initiatives focused on:

**System-level strategies**, including health policy advocacy, hospital partnerships, and building community partnerships.

**Basic needs**, including food security and emergency response.

Strategy and activity planning and implementation began in 2022, including forming Steering Committees and Work Groups, collaborative project development, and cross-community project exchanges.
Collective Impact (CI) is a model for solving complex social problems through organizing cross-sector partners in pursuit of sustainable systems change. The approach emphasizes collaboration, learning, and discovery to that inform activity design and planning, implementation, and maintenance.

The March of Dimes Maternal and Infant Health (MIH) Collective Impact Initiative is using the CI framework to address poor maternal and infant health outcomes across the United States.
THE COLLECTIVE IMPACT INITIATIVE USES A PHASED APPROACH.

PHASE 1: DISCOVERY
- Research context, challenges, and opportunities
- Meet potential partners and stakeholders
- Train on Results Based Accountability and Results Based Facilitation

PHASE 2: INITIATE ACTION
- Identify Convener Team and Task Force members
- Task Force works to develop shared agreement and ownership of common vision

PHASE 3: ORGANIZE FOR IMPACT
- Develop Steering Committee and Work Groups
- Develop strategies including shared performance measures and indicators

PHASE 4: IMPLEMENT
- Develop broad community outreach plan to mobilize community around the issue
- Develop more detailed action plans
- Publish agenda to shared dashboard
- Identify short-term outcomes

PHASE 5: SUSTAIN ACTION AND IMPACT
- Review strategies and solutions for continuous quality improvement
- Continue community engagement
- Track and report progress around shared results
- Identify long-term outcomes
MISSION

To improve maternal & infant health outcomes by using an equity and social drivers lens. We are data-based, results driven and focused on mobilizing communities.

VISION

We imagine a world in which every mom, birthing person, and baby are healthy before, during, and after pregnancy regardless of wealth, race, or geography.

STRATEGY

Our strategy is to improve preterm birth rates by centering communities through anti-racist and data-driven approaches, redistributing power, and promoting systems transformation in our March of Dimes Collective Impact communities.

VALUES

• Build and nurture trusted relationships
• Honor and center people and communities
• Lean into hard conversations
• Accept and expect accountability
• Data-based decision-making
• Evolve and adapt based on new information
• Embed equity and center intersectional anti-racist approach
• Acknowledge historical trauma by promoting healing justice
2022 ACTIVITY AND AWARDS HIGHLIGHTS

JAN
March of Dimes recognized as a Best Place for Working Parents® in Houston, TX as part of work to encourage supportive workplace policies for families and parents

MARCH
Atlanta CI members attended March for Change

Houston CI Director presented at the HCA Gulf Coast BRAVE Conversation webinar about the intersection of health equity and maternal and infant health outcomes

APRIL
Atlanta CI hosted a pop-up food market at Center for Black Women’s Wellness

Chicago held second Task Force meeting

Louisiana CI members hosted March for Change

Shreveport and New Orleans began listening sessions

MAY
Collective Impact team retreat in VA

Atlanta CI hosted IBT training for community members in partnership with Center for Black Women’s Wellness

Miami CI member presented at 2022 Heat Awareness Campaign Press Conference, hosted by the City of Miami and the Women’s Fund Miami, as part of Common Agenda activities around heat and adverse birth outcomes awareness
JULY

Miami CI Director presented at Association of Women’s Health, Obstetric and Neonatal Nurses conference

AUGUST

New Orleans CI Director and March of Dimes recognized as a 2022 Public Policy Collaborative Partner for United Way of Southeast Louisiana

Atlanta CI Director presented at CDC Health Communication conference with Humana about Atlanta CI work

Louisville CI hosted a diaper drive in response to flooding in Eastern Kentucky

Houston CI Director presented at Nurse Family Partnership’s Breastfeeding Awareness month event

SHREVEPORT AND NEW ORLEANS FINALIZED LISTENING SESSION REPORTS
SEPTEMBER

Houston team secured funding for storytelling project

Miami CI Director presented at Black Maternal Health Conference

Chicago began collaborative-wide health equity training

New Orleans CI Director provided testimony at New Orleans City Council in support of the Healthy Homes Ordinance

OCTOBER

Miami CI hosted virtual maternal mental health event

Houston CI hosted community gathering, Mama We Made It: Surviving the Birthing Experience While Black

NOVEMBER

Chicago team hosted Pregnancy and Community Awareness event

Louisiana collaboratives hosted Prematurity Awareness Summit on Prematurity Awareness Day

DECEMBER

Houston CI received grant from the Texas CareSource Foundation for doula activities

Houston and San Antonio began distributing hypertension kits

Broward County hosted Implicit Bias Training and initiated transportation project
PROGRESS IN 2022

In 2022, CI Directors began Phase 3 of the Initiative. This entailed recruiting and continuing to engage community members and partners to form a **Steering Committee and Work Groups** in each community. Collaborative members provided strategic direction and planning for the selected public health interventions and community projects. Furthermore, they committed to take action on aspects of the common agenda and work together to develop shared metrics as well as individual interventions and project metrics.

Collaboratives focused on planning long-term projects that concentrated on root causes of maternal and infant health disparities, while also meeting basic needs with short-term activities.

During 2022, CI collaboratives and staff:

- Drafted **9** action plans, including planned activities and Common Agendas
- Delivered **2** Health equity consultations
- Initiated **36** community-driven strategies
- Implemented **4** “Breaking Through Bias in Maternity Care” sites, providing health care professionals with implicit bias training and skills
- Presented to **1,712** Community members and stakeholders
Targeted solutions

CI Initiatives have begun planning and implementing targeted solutions focused on addressing strategies in their Common Agendas. These include:

**INCREASE ACCESS TO QUALITY CARE**

- Advocate for policies to extend Medicaid to 12 months postpartum.

- Partner with local hospitals and providers to adopt Standards of Respectful Maternity Care.

- Partner with local organization to provide free rides to medical appointments.

**DISMANTLE RACISM**

- Provide trainings to community organizations and members including: Awareness to Action Implicit Bias Trainings, Debrief and Action Session Training.

- Create a community-based racial equity dashboard.

**IMPROVE ECONOMIC SECURITY**

- Advocate for local policies and programs such as:
  - universal paid family and medical leave
  - down payment assistance programs.

- Build workforce development programs to educate and train community members, create career pipelines to connect with local organizations.

**BUILD CONNECTED COMMUNITIES**

- Create food co-ops, mobile food markets, bus stop farmers markets, and advocate for SNAP acceptance at local markets.

- Pilot Universal Basic Income project for pregnant / postpartum community members.
POLICY UPDATES

In consultation with the National Office of Government Affairs (OGA), Collective Impact sites supported 2022 policy and advocacy activity toward improvement of state health outcomes for moms and babies. CI Directors and Initiative members:

**FLORIDA**
- Presented CI needs and common agenda to Legislative Consultants for insight on types of legislation to champion.
- Agreed to serve as March of Dimes representative for Florida Genetics and Newborn Screening Advisory Committee.

**GEORGIA**
- Assisted in planning March for Change Day of Action at the state Capitol.
- Recruited panelists for Comedienne Angelina Spicer’s Postpartum Road Tour to highlight the need for maternal mental health policy.

**ILLINOIS**
- Provided information to OGA policy team on priority legislation and policies.

**KENTUCKY**
- Met with state legislators in support of legislation related to implicit bias training, postpartum extension, and Medicaid coverage for midwives and doulas.
- Recruited volunteers to meet Kentucky Congressional members in support of Newborn Screening Saves Lives Reauthorization Act and Pregnant Workers Fairness Act.

**LOUISIANA**
- Testified for state maternal mental health legislation and local housing policies.
- Collaborated with OGA on strategic policy planning on state-level Pregnant Workers Fairness Act.

**TEXAS**
- Met with Congressional staff during Federal Advocacy Day.
- Incorporated text campaign into local events to support federal Pregnant Worker’s Fairness legislation.
5,756

HOURS WERE INVESTED BY INITIATIVE MEMBERS IN 2022

That’s almost 2 years of 8-hour days!

CI Initiatives have:

186 Active partner organizations

232 Active Initiative members

612 New grassroots advocates added to March of Dimes action network

↑ Listening session facilitator training in Shreveport, LA.

↑ Miami CI Director at a FL Dept of Health community health and wellness event.

The Goodr Pop-up Grocery team in Atlanta, GA.↓
### PEOPLE WERE REACHED BY CI INITIATIVES IN 2022

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**105**
Caregivers in San Antonio received diapers at their Feria de Bebes event in April

**50**
Caregivers received infant care kits at community events in South Florida

**400**
Individuals in Chicago and Atlanta received free, fresh, and healthy food at pop-up community markets.

**54**
Community members attended an Implicit Bias Training hosted by the Atlanta CI Collaborative at the Center for Black Women’s Wellness.

*March of Dimes Director Nikki Boyd with donations for the Kentucky emergency response diaper drive.*
Health Equity in Action: A Best Practice for Transforming Organizations was an opportunity for Collective Impact hospital partners to participate in a health equity consultation to identify action steps for operationalizing health equity frameworks within their organizations. Hospital leaders from Grady Memorial Health System in Atlanta, Georgia and Baptist Health Louisville in Louisville, Kentucky volunteered to participate. Leadership from Grady Memorial Hospital included staff from the health equity department, the Chief Equity Officer, and the Vice President of Nursing. The Executive Director for Women’s Health Services represented Baptist Health Louisville along with additional clinicians from the department.

The consultation process included:

• The completion of a health equity assessment by hospital staff, which included data on how staff believe their hospital is operationalizing health equity
• Virtual interviews facilitated by March of Dimes staff to review assessment results

A final report detailing the health equity consultation process will be provided to each institution in February 2023. The report will include:

• An analysis of the survey results
• Recommendations for integrating equitable practices within the organization

Since the interviews, each hospital has made commitments to move the health equity work forward. Grady Memorial Health Systems has agreed to continue their health equity journey by joining March of Dimes Maternal HealthCARE project that focuses on helping hospitals create cultures of equity. At Baptist, the Women’s Health Services staff committed to sharing the results with leadership as well as reviewing their current departmental policies and practices to identify areas for improvement.
Dismantling racism in Atlanta

At the June March for Babies walk in Atlanta, the CI Initiative launched the Irth Review Collection project.

Irth (as in Birth, but we dropped the B for bias) is the only app where prenatal, birthing, postpartum, and pediatric reviews of care from other Black and brown women are featured.

Kimberly Seals Allers, the Founder of Irth, and local Atlanta-based doulas, participated in the walk and encouraged March for Babies attendees to add their reviews to the app.

The Atlanta CI Initiative’s Dismantle Racism Workgroup is working on collecting more Atlanta-based reviews, with the eventual goal of partnering with a local hospital to use the Irth reviews as a quality improvement tool.

(Top and middle) Atlanta-based doulas and Irth ambassadors at the March for Babies walk.

(Bottom) Merchandise and swag items at the Irth table at March for Babies.
In response to the late July flooding in Eastern Kentucky, the Louisville CI Initiative hosted a diaper drive. Community organizations and partners provided $7,000 of in-kind donations, including:

- **13,421 diapers**, 
- **26,900 baby wipes**, 
- **1,000 self-care kits**, and 
- **500 children’s activity kits**.

Volunteers and staff distributed supplies to a rural shelter in Letcher County, and Appalachian Regional Healthcare, a regional distribution site for shelters and families in need in Perry County.

↑ March of Dimes Kentucky staff Kara Hawk and Kristin Harvey delivering diapers and supplies.

↓ March of Dimes Kentucky staff Nikki Boyd and Nicole Krider with donations.
In October, the Houston CI Initiative hosted a community gathering, *Accelerating Health Equity in Houston, Mama We Made It: Surviving the Birthing Experience While Black*. Over 65 people attended a panel discussion on the state of maternal and infant health outcomes, particularly for Black folks. They also previewed the first video from the Houston CI Initiative’s Hear Her campaign, featuring the story of a local woman's experience with the health care system, the premature birth of her son, and how her voice was not heard.

Attendees learned how they – as a partner, family member, friend, or community member – can support birthing people in their lives.

↑ Raquel Sims, La'Marie Media; and Jen Torres, Senior Executive Director at March of Dimes.

↓ Speakers(L → R): Decrecia Limbrick, Houston Health Department; Erica Giwa, MD, Legacy Community Health; Barre Morris, Memorial Hermann Health System; Lindsay Lanagan, Legacy Community Health; and Sanyika Williams, Sanyika the Doula.
In October, CI Directors and collaborative partners attended the Mom and Baby Action Network’s (MBAN) Igniting Impact Together: Birthing Equitable Communities Summit. Attendees learned about best practices to develop and implement maternal and infant health programs, grew their networks, and disseminated local results.

The CI national team presented “Authentic community engagement in collective agenda setting and program planning,” during which they discussed the background of the CI initiative and methods used to incorporate community voice.

The Atlanta CI Director assisted in planning two experiential learning opportunities during the conference, during which attendees volunteered at community-based organizations in the Atlanta area.

The New Orleans CI Director presented a poster “Environmental Justice for Equitable Birth Outcomes: Disasters, Displacement and Human Services,” on the scope of disasters’ impact on birthing people and babies in Louisiana.

CI Directors and national staff at the Summit.
Meeting acute basic needs in Chicago

In honor of Prematurity Awareness Month and World Prematurity Day, March of Dimes and CI community partners teamed up with Goodr, Inc. to host a pop-up grocery market in November as part of a Healthy Pregnancy and Community Wellness Event.

The pop-up grocery market provided 200 families with free, fresh, and healthy food options including: ground beef and turkey, shelf stable items such as rice, cereal, and canned goods, eggs, bread, fruits, vegetables, milk and juice. Additionally, staff and volunteers distributed diapers, children's coats, and various other resources to families.

This effort supported metro Chicago families who continue to struggle during the pandemic with the rise of inflation and mounting supply chain issues. By meeting basic needs of families in Chicago, the Healthy Pregnancy and Community Wellness Event aimed to alleviate financial stress and provide families with healthy and fresh food.

During the event, staff and volunteers served:

200 families with

6,667 meals and

8,000 lbs of food.

(right) Volunteers load a recipient’s car with supplies from the event.
A focus on policy in New Orleans

The CI Initiative in New Orleans formed a Policy Workgroup as a strategy to focus changing systems. The Workgroup quickly set priorities for the state and local levels and strategized with advocates from diverse sectors. They also celebrated partners’ 2022 legislative wins, including Medicaid and private insurance coverage of human donor milk, and the CROWN Act, a new law preventing hairstyle discrimination.

Working at the local level …

In 2022, the Workgroup prioritized and activated around two successful pieces of legislation, the New Orleans Family Connects program (an evidence-based model of home visiting that provides voluntary, in-home postpartum visits to every family that delivers a baby in New Orleans) and the New Orleans Healthy Homes Ordinance (designed to improve conditions for renters and serve as a data collection and outreach tool to help the city target resources and respond quickly in emergencies).

… and state-wide.

New Orleans’ CI Director provided testimony that supported the passage of Act 188 of the 2022 Louisiana State Legislative Session. The Act empowers primary care doctors (including pediatricians) to universally screen people in the perinatal period for mood disorders.

New Orleans CI Director Robin Gruenfeld (center) providing testimony.
LESSONS LEARNED

Community engagement is a spectrum

Involving community members in Initiatives is essential to center equity, ensure long-term success, and strengthen community relationships. Community engagement can look different depending on the place and phase of the project.

CI staff made a number of modifications to enable community members to be more involved in CI Initiatives. For example, incentives for community members who join the CI Initiatives not only removes barriers for people with “lived experiences,” but also can help initiatives focus more on community building and having a sustainable impact, in addition to quantitative outcomes and impacts.

Using CI phases has been a helpful approach for implementation

Tamarak Institute developed a useful framework that describes the five phases of the development of a Collective Impact Initiative. March of Dimes adapted these phases to include a few components of RBA.

Overall, the phases have proven a helpful tool to describe the journey of a new CI initiative for both internal and external partners, and for giving CI Directors time to understand the maternal and infant health context of their communities before action planning.
Consensus building takes time

Key to the CI approach is building consensus around a Common Agenda. Coming to consensus around the key solutions was more difficult and took more time than expected. An emphasis from RBF on being a “neutral facilitator” helped CI Directors facilitate discussions. This approach, paired with a focus on using data to inform solutions, was critical for building a productive planning atmosphere.

Focusing on both basic and long-term needs is important for communities

While focusing on systems-level change is key, people and families are currently facing one of the most challenging periods in recent history. Collaboratives have directed long-term efforts on systems changes, while also addressing basic needs of their communities. Examples of this includes food and diaper distributions, and birth circles and support groups.

Centering core values helped direct activities

The CI Retreat in May 2022 allowed the team time to elucidate the mission, vision, strategy, and values that are central to the work. This exercise helped CI Directors focus and align future discussions and action plans.
Allocating time to understanding history and context was key

We often jump right into trying to solve a problem, especially if we have been working in the field for many years. The challenge is that those solutions may not actually be addressing the root causes or take into account historical context. By leaning into the first phase of CI development, assessing readiness, and following the RBA framework, CI Directors were able to dedicate time to explore the local data and historical context of their cities.

“Although I was aware of the issues related to accessing care ... I was not as aware of the number of hospital closures and service cuts that occurred for many of the remaining area hospitals ... because of a shift in focus to more COVID related services.”

- CI Director

Through data dives, reading local reports and conversations with local organizations and individuals, CI Directors gained a stronger understanding of the local context for poor outcomes including how they may be rooted in historical policies or community beliefs and values. Directors also noted that some of their preconceived beliefs and understanding were shifted during this exploratory phase.
ACKNOWLEDGEMENT
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