The Maternal Wellbeing City Dashboard

Case Study Analysis: Tulsa, OK
Section 1:

Tulsa’s Maternal Health Challenges
Maternal Health Challenges in Tulsa, OK:

**Racial disparities, infant mortality**

In recent years, the City of Tulsa has shown an interest in and commitment to tracking patterns of racial inequity across various sectors of residents' social and economic life. In 2018, the Mayor’s Office of Resilience and Equity partnered with the Community Service Council to launch an annual report, the Tulsa Equality Indicators. These reports indicate racial disparities are persistently present across a number of key maternal and child health metrics. In particular, the 2020 report revealed the Black infant mortality rate in Tulsa County was 14.8 deaths per 1,000 births as compared to the White infant mortality rate of 4.4 deaths. This issue is also present at the state-level. Oklahoma has one of the highest infant mortality rates in the country, with high racial disparities.

Similar patterns of inequity are evident when examining other key maternal and child health metrics, like low birth weight. The Tulsa County Health Department reported that 14.8% of Black mothers gave birth to low birth weight infants – twice the percentage at which White mothers had low weight births. Recent funding prioritizes addressing these racial inequities. In January 2021, Merck for Mothers selected the Tulsa Birth Equity Initiative, an organization dedicated to reducing maternal health disparities, to join their new Safer Childbirth Cities Initiative cohort.

**Teen birth rates**

Racial inequities are also evident in teen birth rates; however, the issue of high teen birth rates is a challenge for all racial and ethnic groups in Tulsa. This high rate is a consistent issue in Oklahoma, at the state and county level. In 2019, the state ranked fourth in the U.S. for the highest prevalence of teen births. In 2016, the Tulsa County Maternal and Child Health data dashboard reported the county’s teen birth rate as 33.9 live births per 1,000 females aged 15-19. This rate is on par with Oklahoma’s rate, and although it has been decreasing in recent years, it is still much higher than the U.S. average of 17.4 live births. Yet again, racial disparities are present with Black teens experiencing the highest birth rate among all racial and ethnic groups.

Given the persistence of this issue, the County Health Department’s most recent health improvement plan identified teen pregnancy as one of their five focus areas and suggest strengthening their pre-existing teen pregnancy prevention program. Alongside the County Health Department’s efforts, the George Kaiser Family Foundation (GKFF) also identifies teen pregnancy as an area of concern. In 2010, GKFF created the Take Control Initiative to improve access to contraception for teens through education, outreach, and clinical services.

**Maternal mental health**

City and state agencies are demonstrating a commitment to improving mental health. In 2019, Oklahoma’s state legislature passed Senate Bill 419 to address maternal mental health. This legislation requires hospitals offering labor and delivery services to provide new mothers with information on the symptoms of perinatal mental health disorders, coping methods, and treatment resources. Additionally, the 2020 Health Resources and Services Administration’s (HRSA) Oklahoma State Action Plan identifies improving mental and behavioral health as an objective in their maternal health improvement strategy. Similarly, the Mayor’s Commission on the Status of Women identified improving mental health for
Tulsan women as a primary objective in their 2020 Annual Report. The City Council and Mayor’s Office are also aligned on the importance of mental health. In the FY20-21 city budget, approximately $2 million was allocated to citywide initiatives and programs dedicated to improving mental health and wellbeing. Even though this budgetary allocation is not specifically earmarked for birthing people, it is still indicative of the city’s identification and prioritization of mental health.

Insurance coverage

Another factor exacerbating the health of Tulsa residents is the high uninsured rate. As of 2017, Tulsa had an uninsured rate of 15.9%, which is slightly higher than the state’s rate of 14.2% and significantly higher than the national rate of 8.73%. This high uninsured rate can largely be attributed to the refusal of Oklahoma’s State legislature to expand Medicaid coverage. However, this decision was recently reversed via ballot initiative in June 2020 and will be fully enacted by July 2021. Although expansion will reduce the uninsured rate, it will not remedy the problem of poor health outcomes overnight. Given the history of high uninsured rates among Oklahomans, many city residents, including birthing people, are likely contending with an accumulation of poor health behaviors and outcomes.
Section 2: Assessing the Sociopolitical Landscape
Tulsa, OK: City Summary

Tulsa is the second largest city in Oklahoma and is situated within Tulsa County, serving as the county seat. As of 2019, Tulsa had a population of 401,190. The city has a larger share of White residents with Hispanic or Latino and Black residents trailing as the second and third largest groups, each compromising approximately 15% of the population. Tulsa also has a notably higher percentage of Native American residents than the other two testing cities, Pittsburgh, PA and New York City, NY. Regarding party affiliation, Tulsa reflects similar trends seen across the state – it is a majority Republican county located within a Republican state. The city of Tulsa is led by Republican Mayor G.T. Barnum.

The Tulsa Metropolitan Statistical Area compromises 25% of the state’s population and accounts for 27.8% of the state’s economic activities. Tulsa’s economy represents a myriad of industries. The most relevant are aerospace (manufacturing and aviation), health care, energy, machinery and electrical equipment (manufacturing and transportation), and distribution and logistics. Despite this diverse array of industries, Tulsa residents confront a relatively high poverty rate of 19.4% - an issue that has been exacerbated by the COVID-19 pandemic. Tulsa entered 2020 with an unemployment rate of 3.3% but witnessed a spike to 15.1% in April 2020 due to COVID-19. However, recent reports indicate that unemployment has decreased since April and is hovering between 5-6% as of November 2020.

To fully understand Tulsan society, it is also worth examining how the aftermath of their racial tragedies impact societal dynamics. Tulsa is the site of what has been described as “the single worst incident of racial violence in American history” – the Tulsa Race Massacre. The perpetrators targeted North Tulsa, a historically Black neighborhood that remains segregated today, with the neighborhood holding 17% of the city’s population and 41% of Tulsa’s Black population. To this day, the Black community targeted during the massacre, residents of North Tulsa, confront a significant number of social and economic disparities. Current data demonstrates an approximately eight and a half year difference in average life expectancy between North and South Tulsa. North Tulsa residents are also more likely to smoke, confront barriers to financial stability, earn below living wages, and see vacant housing in their neighborhood (an indicator correlated with high crime rates). Although there are a number factors contributing to Tulsa’s health challenges, it is undeniable that Black communities and communities of color are disproportionately impacted. In order to examine Tulsa’s maternal health issues, it is critical to understand how this racist legacy intersects with health and wellbeing today.
The city of Tulsa is governed according to a strong mayor-council system. In this dynamic, the Mayor operates as the city’s chief executive and the nine person City Council serves as the city’s primary legislative body. As of 2021, the city has 19 departments and a series of advisory boards and commissions. The most relevant to the Maternal Wellbeing City Dashboard project are the Office of Resilience and Equity and Commissions on the Status of Women, Greater Tulsa African-American Affairs, Hispanic Affairs, and Indian Affairs.

**Tulsa Mayor: G.T. Barnum (R)**

**Primary Responsibilities**
- Prepare and propose budget for City Council approval
  - Mayoral transfer authority: transfer of funds from one expenditure account to another, or from one project to another within the same department with a fund limit of less than $100,000
- Sign legislation into law
- Appoint departmental directors and committee members
- Oversee day to day operations of city activities

**Term Limits**
- 4 year term
- Next mayoral election: 2024

**Tulsa City Council**

**Primary Responsibilities**
- Review, refine, and adopt changes to proposed city budget according to the council’s identified priorities
- Review, debate, and ultimately reject or approve proposed legislation
- Confirm mayoral appointments

**Term Limits**
- 2 year term
- Staggered elections every year

**Commissions, Advisory Boards, and Committees**

**Primary Responsibilities**
- Review, debate, and propose alterations to current city policies and programs and recommend strategies or policies relevant to their appointed position
- Advise the city council on matters related to their commission, board, or committee

**Term Limits**
- Serve at will of City Council and Mayor
- Appointed by Mayor, position approved by City Council
Moments of Public Intervention:

The City of Tulsa solicits public input in Stage 3, when the Council is reviewing, amending, and adopting the budget. However, advocates and interest groups should consider intervening before Stage 3. In Mayor Barnum’s 2020 Speech to the City, he remarked that the budget was unanimously approved by the City Council every year in the last four years. This implies that much of the priority setting and budget development happens before Stage 3, and alterations to the budget are actually occurring in Stage 1 and 2. Consequently, advocates, interest groups, and residents interested in influencing the city’s budget may need to appeal to the Mayor’s Office and City Council in Stage 1 and 2.

Health Governance

The city of Tulsa does not hold any official authority over the legislation and regulation of health care delivery for city residents. This power lies with the Tulsa County Health Department, Oklahoma State Legislature, and federal agencies.

Health governance in Oklahoma operates according to a hybrid model, in which some local health departments are managed by the state and others by local governments. The Tulsa County Health Department is one of two autonomous local health departments in the state of Oklahoma, with statutory public health jurisdiction across Tulsa County and the city of Tulsa. The most relevant departments and programs managed by the Tulsa County Health Department are Healthy Start, Tulsa’s Fetal and Infant Mortality program, Teen Pregnancy Prevention programs, Pathways to Health, and the county-managed WIC program.
Notable Neighborhoods, Communities, Populations

The following section provides a brief overview of neighborhoods, communities, and populations that have a unique relationship with the city due to 1) representing a significant percentage of the city’s overall population, 2) their involvement or connection to a notable incident or historical event, or 3) the associated risk between their living conditions and poor health outcomes. The following is not an exhaustive list of notable communities in Tulsa. Further research or alternative perspectives may prompt the inclusion of additional, noteworthy populations.

North Tulsa Neighborhood

As discussed in the City Summary, North Tulsa has a complex history with the city of Tulsa. The ramifications of the 1921 massacre and persistent presence of racism today contribute to North Tulsa’s poor living conditions and subsequently, adverse health outcomes. Furthermore, the neighborhood is predominately Black, and Black Tulsan women confront significant maternal health disparities. Consequently, North Tulsa is an important community to consult and attend to when testing or implementing a health intervention in Tulsa.

Native American Population

Approximately 4.5% of Tulsa’s population is Native, a percent that is notably higher than the other two testing sites, Pittsburgh and New York City. Tulsa’s larger Native population can be explained by its state history. The City of Tulsa and Tulsa County have a special relationship with the Muscogee (Creek) Nation because a majority of Tulsa County sits within Native land, and in July 2020, the Supreme Court ruled that approximately half of Oklahoma is officially situated within a Native American Reservation. Subsequently, city and county agencies collaborate with tribal authorities on issues related to regional planning and criminal justice. This relationship and the relatively high percentage of Native people in Tulsa has important implications for how to test or implement health interventions in the region.

Incarcerated Women

Oklahoma imprisons a higher percentage of women than any other state, with approximately 142 out of every 100,000 female Oklahomans incarcerated. Of this population, Black women and women of color are disproportionately represented. The socioeconomic factors that make a woman more susceptible to incarceration are plentiful in certain Oklahoman communities, most notably North Tulsa. Consequences of incarceration, like familial separation, are devastating to mothers and families. It is important to understand this population before testing or implementing an intervention that is designed to address the built and social environment.

Religious Community

The religious profile of Tulsa differs markedly from the other testing sites. Oklahoma sits firmly in the Bible belt. State residents identify as Southern Baptists approximately seven times more often than other Americans. 79% of Oklahomans identify as Christian, and 87% of adults report that religion is very important or somewhat important to their life. Although this is state-level data, it is still critical to consider how the broader state environment affects city residents and the city’s sociopolitical landscape.
Section 3:
Stakeholder Analysis
### Stakeholder Analysis, Tulsa, OK:

#### Stakeholder Summary

<table>
<thead>
<tr>
<th>Elected Offices</th>
<th>Public Bodies</th>
<th>Community Organizations</th>
<th>Advocacy Groups</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Mayor G.T. Barnum</td>
<td>• Office of Resilience and Equity</td>
<td>• North Tulsa Community Coalition</td>
<td>• Tulsa Birth Equity Initiative (TBEI)</td>
</tr>
<tr>
<td>• City Council</td>
<td>• Tulsa Equality Indicators Initiative</td>
<td>• Pathways to Health</td>
<td>• Take Control Initiative</td>
</tr>
<tr>
<td>• INCOG</td>
<td>• City Commissions; Commission on the Status on Women, Hispanic Affairs,</td>
<td>• Metriarch</td>
<td>• OK Women’s Coalition</td>
</tr>
<tr>
<td>• (Indian Nations Council of Governments)</td>
<td>Native Affairs, Greater Tulsa African-American Affairs</td>
<td>• Community Service Council (CSC)</td>
<td>• Together OK</td>
</tr>
<tr>
<td>• OK State Senators and Representatives</td>
<td>• Tulsa County Health Department</td>
<td>• Healthy Start – CSC</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Healthy Start – Tulsa County Health Department</td>
<td>• Still She Rises</td>
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</tr>
</tbody>
</table>

| Research                                                                      | Health Systems                                                                | Business Organizations                                                  | Funders                                                                   |
|                                                                              | • OSU Medical Center                                                          | • Well OK: Northeastern OK Business Coalition on Health                 | • George Kaiser Family Foundation (GKFF)                                  |
| • OK Policy Institute                                                        | • Hillcrest Medical Center (Helmerich Women’s Health Center)                  | • Tulsa Regional Chamber of Commerce                                   | • Tulsa Community Foundation                                             |
|                                                                              | • St. Francis Health                                                          | • Tulsa’s Future                                                        | • Tulsa Area United Way                                                  |
|                                                                              | • Morton Comprehensive Health Services                                        | • Mosaic Tulsa                                                          | • Charles and Lynn Schusterman Family Philanthropies                     |
|                                                                              | • Tulsa Family Doulas                                                         | • TYPROS                                                                | • Zarrow Foundation                                                      |
|                                                                              | • Special Delivery Midwifery Care                                             |                                                                         | • Warren Foundation                                                       |
|                                                                              | • Crossroads Counseling                                                       |                                                                         |                                                                           |
|                                                                              | • Modern Village Midwifery                                                    |                                                                         |                                                                           |
|                                                                              | • Tulsa Birth Center                                                         |                                                                         |                                                                           |


See Appendix A for an evaluation of each stakeholders’ interest and influence.

**Stakeholder Descriptions**

**High-Impact Stakeholders:** The maternal health network in Tulsa is extensive and in order to provide a prioritized assessment, stakeholders were evaluated based on interest and influence.

High-impact players are likely the most relevant stakeholders for the Maternal Wellbeing City Dashboard project. These stakeholders are defined as:

- **High to Moderate-High Interest:** an expressed interest in supporting birthing people and healthy communities

- **High Influence:** possessing between two to three levers of influence, or one lever that has been assessed as significant

High-impact stakeholders in Tulsa’s maternal health network are located in the top, right quadrant of the matrix.
**Stakeholder Analysis, Tulsa, OK:**

**Low-Interest Stakeholders:** Low-interest stakeholders in Tulsa’s maternal health network are located in the bottom quadrants of the matrix. If the team is interested in looking beyond maternal health or health oriented organizations, examine the following:

- United Way
- Zarrow Foundation
- OK Policy Institute
- Still She Rises

**Potential Opposition:**

*Opposition Based on Ideological Grounds:* Some stakeholders may oppose the intervention for ideological reasons. They may believe its mission is not appropriate or ethical. These individuals and organizations may vary in the intensity of their opposition. Some might merely decline to engage with the work, others may proactively deter or prevent others in the network from engaging. For example, in Tulsa, there is a strong religious community that may oppose pro-choice organizations or projects. Given the purpose of the Maternal Wellbeing City Dashboard and Ariadne Labs’ prior engagement with the Tulsa healthcare network, this is not an anticipated issue. Nonetheless, it is worth considering if and how stakeholders in the maternal health network might oppose the intervention for ideological reasons.

*Opposition Based on Scope of Work:* Other stakeholders may oppose the intervention based on its objectives or scope of work.

- **Overlap:** The intervention’s scope of work may overlap with work already occurring in the city. For example, the Tulsa County Health Department compiles and publishes county health data, with specific attention to the built environment, socioeconomic status, and maternal and child health. Even though the Maternal Wellbeing City Dashboard is structured differently than Tulsa County’s Health Report, DDI should be aware of this overlap and consider how it could incur resistance among county public health officials and organizations already relying on the County Health Report.

- **Resistance to outsiders:** Other stakeholders may be resistant to outside organizations entering the city’s maternal health space. It is important to recognize which stakeholders are resistant to outside intervention and to understand why. Their opposition may stem from a recurring issue in the city’s maternal health or healthcare space in which organizations enter and take over the work or dominate resources without consideration to those who have been doing the work all along. Understanding this tension and where it lies is critical to developing respectful testing or implementation strategies.

*Opposition Based on Competition:* Some stakeholders may oppose the intervention because it introduces competition over funding, political attention, or operational capacity. The stakeholders most susceptible to competition based opposition are organizations with either the same or similar objectives as the intervention.
Stakeholder Analysis, Tulsa, OK:

Stakeholder Spotlight
See Appendix for stakeholder list.

Elected Offices

1. Name: Mayor G.T. Barnum (R)
2. Priorities: Reelection, appeasing constituents, and maintaining positive relationships with council members. The administration’s stated priorities are: economic development, advancing equality, investing and building public infrastructure, and public safety.
3. Scope of work: Barnum is responsible for day to day operations of city activities; managing city departments, advisory boards, and commissions; preparing Tulsa’s budget; and operating as the executive leader of Tulsa’s government.
4. Notable work: Under Barnum’s leadership, the city has:
   o Established the Tulsa Equality Indicators Report, which uses data to measure inequality across a variety of social and economic domains.
   o Established the Mayor’s Office of Resilience and Equity which was designed to implement the Resilient Tulsa strategy, a plan to counteract Tulsa’s pervasive legacy of racism by addressing key racial disparities.
   o Leading Improve Our Tulsa, the largest streets improvement in Tulsa to date
   o Managing Vision Tulsa, the largest economic development capital improvements program in Tulsa’s history
5. Role in this stakeholder network:
   o Decision-maker, convene

Community and Advocacy Organizations

1. Name: Community Service Council
2. Mission: To confront challenges to health, social, education and economic opportunities, and strategically advance effective community-based solutions
3. Priorities: Social, health, education, and economic challenges
4. Scope of work: Manage a 360-degree fully coordinated referral network; provide peer nonprofit agencies and community based organizations with data, research, and operational support
5. Notable work:
   o Tulsa Equality Indicators Initiative, co-run with Tulsa’s Office of Equity
   o Healthy Start – CSC
   o Healthy Women, Healthy Futures: provides behavioral health care coordination and inter-conception case management to Healthy Start enrollees, offer education and referral services
   o Fatherhood Coalition
6. Role in the stakeholder network:
   o Convene, coordinate, research

1. Name: Tulsa City Council
2. Priorities: Reelection, appease district constituents, maintain positive relationships with Mayor and council members
3. Scope of work: Operates as the city’s legislative authority; reviews and adopts city budget; confirms mayoral appointments
4. Role in stakeholder network:
   o Decision-maker, convene

1. Name: Metriarch
2. Mission: Statewide data collaborative that aims to normalize and broaden women’s health conversations in Oklahoma through data storytelling, resource curation, and interactive outreach events
3. Priorities: Women’s health
4. Scope of work: Research and publish on issues related to women’s health and wellbeing; promote state and local-level advocacy through use of their curated resources; host a biannual conference on the intersection of data and women’s health
5. Notable projects:
   o 2021 Lady Charts digital conference
6. Role in the stakeholder network
   o Advocate, research, convene
The interactive version of Tulsa’s Stakeholder Relationship Map is available here.

Interactive version:
- Hover over stakeholder to isolate their individual relationship map
- Select organization category at the bottom of the page (ex: Funder, Elected Official) to isolate all organizations in the same category
Section 4: Change Analysis
## Change Analysis, Tulsa, OK:

### Changes in the Health Landscape

<table>
<thead>
<tr>
<th>Stakeholder</th>
<th>Description</th>
<th>Type</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mayor’s Commission on the Status of Women</td>
<td>The Commission’s 2020 report identified improving mental health for Tulsan women as a goal for their health subcommittee.</td>
<td>Opportunity</td>
<td>Potential champions: The report’s recommendations for improving mental health for Tulsan women were relatively limited. It mentioned increasing efforts to educate women and refer them to appropriate services. This objective is not identically aligned with the Maternal Wellbeing City Dashboard but the Commission’s priorities and proximity to the Mayor’s Office and City Council suggest they would be effective champions of the dashboard.</td>
</tr>
<tr>
<td>Mayor’s Greater Tulsa Commission on African-American Affairs</td>
<td>The Commission is establishing two new subcommittees dedicated to health and wellness, and housing and transportation. The subcommittees are specifically designed to target access and outcomes for Black Tulsans.</td>
<td>Opportunity</td>
<td>Potential champions</td>
</tr>
<tr>
<td>Mayor’s Office of Resilience and Equity, Community Service Council</td>
<td>The Tulsa Equality Indicators Initiative produces an annual report tracking racial disparities in Tulsan society across the domains of: economic development, public health, housing, justice, social services, and education.</td>
<td>Opportunity</td>
<td>Potential champions</td>
</tr>
</tbody>
</table>

### State-Level Changes

<table>
<thead>
<tr>
<th>Stakeholder</th>
<th>Description</th>
<th>Type</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>OK Legislature</td>
<td>In June 2020, OK residents voted to expand Medicaid by ballot initiative.</td>
<td>Awareness</td>
<td>Medicaid expansion will likely shift the state’s health landscape as approximately 200,000 more Oklahomans are expected to receive insurance. This change may prompt a shift in priorities for maternal health advocates and providers as the health system adapts to the influx of new patients and previously uninsured patients are now covered.</td>
</tr>
</tbody>
</table>
Change Analysis, Tulsa, OK:

Changes in the Maternal Health Landscape

<table>
<thead>
<tr>
<th>Stakeholder</th>
<th>Description</th>
<th>Type</th>
<th>Rationale</th>
</tr>
</thead>
</table>
| Tulsa Birth Equity Initiative (TBEI), Merck for Mothers | Merck for Mother’s selected TBEI for the 2021 Safer Childbirth Cities Initiative cohort. TBEI and collaborators will leverage the expertise and influence of local organizations to improve maternal health policies, data systems and service delivery systems for Black, Indigenous and justice-involved women and teens.40 | Opportunity | Potential champion(s) 
Potential collaboration: The interest in reforming maternal health policies and data systems suggests that TBEI or its collaborators may be interested in using or promoting the Maternal Wellbeing City Dashboard. |
| OK Legislature | In 2019, the state legislature passed a “Maternal Mental Health” bill requiring hospitals providing labor and delivery services to inform birthing people about perinatal mental health disorders (including information on symptoms, coping methods, and treatment resources).41 | Awareness | This bill demonstrates that maternal mental health is a priority at the state level and activities designed to promote better mental health for birthing people may have state level support. |

State-Level Changes

<table>
<thead>
<tr>
<th>Stakeholder</th>
<th>Description</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shepherd’s Law</td>
<td>In 2020, the state legislature passed a law requiring Certified Midwives and Certified Professional Midwives to be licensed and regulated in Oklahoma.42</td>
<td>Awareness</td>
</tr>
</tbody>
</table>
Appendices
# Appendix A: Tulsa Interest and Influence Mapping

<table>
<thead>
<tr>
<th>Name</th>
<th>Importance</th>
<th>Influence Metrics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birthing people</td>
<td>High</td>
<td>Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Accountability [+]</td>
</tr>
<tr>
<td>Mayor’s Office</td>
<td>High</td>
<td>Legal authority [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Control of strategic resources [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Negotiating power (re: City Council, general public, community organizations) [+]</td>
</tr>
<tr>
<td>City Council</td>
<td>High</td>
<td>Legal authority [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Control of strategic resources [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Negotiating power (re: Mayor, general public, community organizations) [+]</td>
</tr>
<tr>
<td>Commission on Women</td>
<td>Moderate</td>
<td>Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Negotiating power (re: Mayor, City Council) [+]</td>
</tr>
<tr>
<td>Commission on African American Affairs</td>
<td>Moderate</td>
<td>Specialist knowledge and skills [+]</td>
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<tr>
<td></td>
<td></td>
<td>Negotiating power (re: Mayor, City Council) [+]</td>
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<tr>
<td>Office of Resilience and Equity</td>
<td>Moderate</td>
<td>Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Negotiating power (re: Mayor, City Council) [+]</td>
</tr>
<tr>
<td>Tulsa County Health Department</td>
<td>High</td>
<td>Legal authority [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Control of strategic resources [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Negotiating power (re: Mayor, City Council, general public, community organizations) [+]</td>
</tr>
<tr>
<td>Healthy Start – THD</td>
<td>High</td>
<td>Implementation authority [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td>INCOG</td>
<td>Moderate</td>
<td>Legal authority [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Negotiating power (re: Mayor, City Council) [+]</td>
</tr>
<tr>
<td>North Tulsa Community Coalition</td>
<td>Moderate</td>
<td>Specialist knowledge and skills (specific to North Tulsa community health needs) [+]</td>
</tr>
</tbody>
</table>
## Appendix A: Tulsa Interest and Influence Mapping

<table>
<thead>
<tr>
<th>Organization</th>
<th>Level</th>
<th>Key Attributes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pathways to Health</td>
<td>Moderate</td>
<td>Negotiating power (re: community organizations) [+], Implementation authority [+]</td>
</tr>
<tr>
<td>Metriarch</td>
<td>Mod-High</td>
<td>Specialist knowledge and skills [+], Negotiating power (re: community organizations) [+]</td>
</tr>
<tr>
<td>Community Service Council</td>
<td>Mod-High</td>
<td>Implementation authority [+], Negotiating power (re: community organizations, Healthy Start, Tulsa County Health Department) [+]</td>
</tr>
<tr>
<td>Healthy Start – CSC</td>
<td>High</td>
<td>Implementation authority [+], Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td>TBEI</td>
<td>High</td>
<td>Implementation authority [+]</td>
</tr>
<tr>
<td>OK Women’s Coalition</td>
<td>Mod-High</td>
<td>Implementation authority [+]</td>
</tr>
<tr>
<td>GKFF</td>
<td>High</td>
<td>Control of strategic resources [+], Implementation authority [+], Negotiating power (GKFF funded community organizations) [+]</td>
</tr>
<tr>
<td>Tulsa Area United Way</td>
<td>Moderate</td>
<td>Control of strategic resources [+], Negotiating power (re: United Way funded community organizations) [+]</td>
</tr>
<tr>
<td>Schusterman Family Philanthropies</td>
<td>Mod-High</td>
<td>Control of strategic resources [+], Negotiating power (re: Schusterman funded community organizations) [+]</td>
</tr>
<tr>
<td>Zarrow Foundation</td>
<td>Moderate</td>
<td>Control of strategic resources [+], Negotiating power (re: Zarrow funded community organizations) [+]</td>
</tr>
<tr>
<td>OK Policy Institute</td>
<td>Moderate</td>
<td>Specialist knowledge and skills [+], Control of strategic resources (operational bandwidth to advocate) [+]</td>
</tr>
</tbody>
</table>
### Appendix A: Tulsa Interest and Influence Mapping

<table>
<thead>
<tr>
<th>Organization</th>
<th>Level</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morton Comprehensive Health Services</td>
<td>High</td>
<td>Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Implementation authority [+]</td>
</tr>
<tr>
<td>Hillcrest Medical, Helmerich Women’s Center</td>
<td>High</td>
<td>Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Implementation authority [+]</td>
</tr>
<tr>
<td>OSU Medical Center</td>
<td>High</td>
<td>Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Implementation authority [+]</td>
</tr>
<tr>
<td>St. Francis Health System</td>
<td>High</td>
<td>Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Implementation authority [+]</td>
</tr>
<tr>
<td>Tulsa Family Doulas</td>
<td>High</td>
<td>Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Implementation authority [+]</td>
</tr>
<tr>
<td>Tulsa Birth Center</td>
<td>High</td>
<td>Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Implementation authority [+]</td>
</tr>
<tr>
<td>Special Delivery Midwifery Care</td>
<td>High</td>
<td>Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Implementation authority [+]</td>
</tr>
<tr>
<td>Well OK: Northeastern OK Business Coalition on Health</td>
<td>Moderate</td>
<td>Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Negotiating power (re: community organization members) [+]</td>
</tr>
<tr>
<td>Chamber of Commerce</td>
<td>Low</td>
<td>Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Negotiating power (re: community organization members) [+]</td>
</tr>
<tr>
<td>Tulsa’s Future</td>
<td>Low</td>
<td>Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td>Mosaic Tulsa</td>
<td>Low</td>
<td>Specialist knowledge and skills [+]</td>
</tr>
<tr>
<td>TYPROS</td>
<td>Low</td>
<td>Specialist knowledge and skills [+]</td>
</tr>
</tbody>
</table>
Appendix B: Stakeholder Spotlight

Tulsa, OK: Stakeholder Spotlight

Elected Offices
1. Name: Indian Nations Council of Governments (INCOG)
2. Scope of work: A voluntary association of local and tribal governments in the Tulsa metropolitan area. The association provides planning and coordination services for local and regional issues related to transportation, community and economic development, environmental quality, energy programs, public safety, and elderly services.
3. Priorities: Local and regional community planning
4. Role in the stakeholder network:
   o Decision-maker, convene

Public Bodies
1. Name: Office of Resilience and Equity
2. Mission: To promote resilience and equity in Tulsa in all aspects of city life from employment, economic development, health, mental health, and human rights
3. Priorities: Social and economic equity
4. Scope of work: Manages five commissions that represent and advocate for vulnerable populations; oversees the complaint and investigation process for Tulsans experiencing discrimination (housing, employment, public accommodations); advises the Mayor on issues of equity
5. Notable work:
   o Tulsa Equality Indicators Initiative, co-run with Community Service Council
   o Manages five commissions: Status of Women. Greater Tulsa African-American Affairs, Hispanic Affairs, Indian Affairs, Human Rights
   o Each commission is charged with researching inequities and areas of improvement pertinent to the charge of their commission with a particular focus on the availability and quality of city services, advocating to address identified challenges, educating Tulsans, and facilitating change as directed by the Mayor or City Council.
6. Role in the stakeholder network:
   o Research

1. Name: Tulsa County Health Department (THD)
2. Mission: To improve the health and wellbeing of all Tulsa County residents, in order to make Tulsa County the healthiest county in the country
3. Priorities: Community health, maternal and infant health
4. Scope of work: THD is one of two autonomous local health departments in Oklahoma, with statutory public health jurisdictions over Tulsa County and City of Tulsa. THD sets public health policies and assists in establishing the annual THD budget. THD coordinates county maternal and child health services and manages the WIC program.
5. Notable work:
   o Community health improvement plan
   o Teen pregnancy prevention program
   o Maternal child health outreach program
   o Tulsa’s fetal and infant mortality program
   o Healthy Start
6. Role in the stakeholder network:
   o Decision-maker, research, convene, coordinate

1. Name: Mayor’s Commission on the Status of Women
2. Mission: To support and advance the rights and wellbeing of all women across Tulsa
3. Priorities: Social, economic, and health conditions of Tulsa women
4. Scope of work: The Commission operates in an advisory capacity to the Mayor and City Council concerning the rights, needs, and challenges of women in the Tulsa area. This body develops goals, conducts research, educates the community on issues
Appendix B: Stakeholder Spotlight

Tulsa, OK: Stakeholder Spotlight

1. Name: Mayor’s Greater Tulsa African-American Affairs Commission
2. Mission: To serve and advocate for African-Americans in the city of Tulsa to create a strong, prosperous, self-sustaining community while demanding systemic change
3. Priorities: Social, economic, and health conditions of Tulsa’s African-American residents
4. Scope of work: The Commission operates in an advisory capacity to the Mayor and City Council concerning the rights, needs, priorities, and challenges of Tulsa’s African-American residents. The body works to enact systemic changes in housing and transportation, economic development, education, culture and awareness, equal justice, and accountable policing, and health and wellness. The Commission researches racial inequities, drafts recommended policies and ordinances to address community concerns and social determinants of health, propose programmatic investments or adjustments, and promotes awareness of issues concerning Tulsa’s African-American community.
5. Notable work:
   o 2020 Annual Report
6. Role in the stakeholder network:
   o Research, advocate

2. Mission: To improve birth outcomes and reduce infant mortality
3. Scope of work: Tulsa County Health Department’s Healthy Start is one of two Healthy Start programs in the city. The program offers clinic triage care, home visitation case management services for expecting and postpartum women, referral programs for WIC and social services, parenting and pregnancy education courses, and assistance for housing, foods, and baby needs.
4. Notable work:
   o Case management services
   o Fatherhood Program
5. Role in the stakeholder network:
   o Health service provider

Community and Advocacy Organizations

1. Name: Community Service Council
2. Mission: To confront challenges to health, social, education and economic opportunities, and strategically advance effective community-based solutions
3. Priorities: Social, health, education, and economic challenges
4. Scope of work: Manage a 360-degree fully coordinated referral network; provide peer nonprofit agencies and community based organizations with data, research, and operational support; conduct data collection and research
5. Notable work:
   o Tulsa Equality Indicators Initiative, co-run with Tulsa’s Office of Equity
   o Healthy Start – CSC
   o Healthy Women, Healthy Futures: provides behavioral health care coordination and inter-conception case management to Healthy Start enrollees, offer education and referral services
   o Fatherhood Coalition
6. Role in the stakeholder network:
Appendix B: Stakeholder Spotlight

Tulsa, OK: Stakeholder Spotlight

1. Name: **North Tulsa Community Coalition (NTCC)**
2. Mission: NTCC implements and supports sustained opportunities for residents in North Tulsa to achieve improved health outcomes and quality of life
3. Priorities: Health equity, community health, social determinants of health
4. Scope of work: NTCC organizes task forces on education, health, economic stability, neighborhood and built environment, and discrimination and justice; hosts events and community meetings to engage the North Tulsa community for the purpose of advancing improved health; manages community initiatives.
5. Role in the stakeholder network:
   - Advocate, research, convene

1. Name: **Healthy Start – Community Service Council**
2. Mission: To reduce infant and maternal mortality
3. Scope of work: Offers culturally sensitive, comprehensive care coordination services to support the health and social needs of birthing people and their families before, during, and after pregnancy; provides educational services on parenting, fatherhood programs, and family planning; coordinates referrals to social supportive services, like transportation or housing assistance
4. Notable work:
   - Healthy Start Care Coordination Program
   - Fatherhood Program
5. Role in the stakeholder network:
   - Advocate, research

1. Name: **Pathways to Health**
2. Mission: To improve the health and wellness of residents of Tulsa County by making the healthy choice the easy choice
3. Priorities: Community health
4. Scope of work: Provide micro grants to Tulsa organizations that are committed to improving outcomes in areas of built environment, educational attainment, food environment, and health care; leverage community partnership to form community health improvement plans and health initiatives
5. Role in the stakeholder network:
   - Convene, funder

1. Name: Tulsa Birth Equity Initiative (TBEI)
2. Mission: Equip Tulsan families to have healthy births with dignity and reduce maternal health disparities
3. Priorities: Health equity, maternal and infant health
4. Notable work:
   - New member (January 2021) of Merck for Mother’s second cohort of Safer Childbirth Cities. Through this partnership, TBEI plans to address inequities within maternal health policies, data systems, and service delivery systems for Black and Indigenous women and teens.
5. Role in the stakeholder network:
   - Advocate, research

Funders

1. Name: **George Kaiser Family Foundation (GKFF)**
2. Mission: Providing every child with an equal opportunity; driven by the theme “no newborn child bears any responsibility for the circumstances of her birth and yet her future chances for success in life is heavily influenced by those circumstances.”
3. Priorities: Maternal and infant health, teen pregnancy, community health, social services
4. Scope of work: GKFF’s work focuses on four themes: parent engagement and early education, health and family wellbeing, vibrant and inclusive Tulsa, and birth through eight strategy for Tulsa. The Foundation directs grant funding towards community...
organizations and service providers operating in one of the four identified areas and collaborates with public and private partners to support and scale promising interventions.

5. Notable work:
   - Maternal Child Health projects: Focus on “positively influencing the health of young families through programs that enable them to have planned pregnancies and healthy birth outcomes.”
   - Projects: Take Control Initiative, REACH, Centering Pregnancy
   - Birth Through Eight Strategy: A network of public and private partners committed to developing and maintaining high quality, local services dedicated to early childhood development.
   - Community Health projects: Focus on improving access to quality care for low-income families and disenfranchised communities across Tulsa.
   - Social services projects: Fund local nonprofits addressing the food, shelter, clothing, health care, education, mental health, and youth development needs of Tulsans.

6. Role in the stakeholder network
   - Funder, convene, coordinate

1. Name: Charles and Lynn Schusterman Family Philanthropies
2. Mission: A commitment to pursue justice, repair the world and treat all people with dignity and civility through investments in U.S. public education, the Jewish people and Israel, and marginalized individuals and communities
3. Relevant Priorities: Gender and reproductive equity; Tulsa community improvement
4. Scope of work: A grant foundation founded in Tulsa that supports global philanthropic endeavors but also specifically focuses on organizations and initiatives that support the Tulsa community.

5. Notable partnerships:
   - Community Service Council, Tulsa Area United Way, TYRPOS, OK Policy Institute, Emergency Infant Services, Domestic Violence Intervention Services, Oklahomans for Equality

6. Role in the stakeholder network:
   - Funder

Business Organizations

1. Name: Well OK – Northeastern Oklahoma Business Coalition on Health
2. Mission: To understand and improve the value of the healthcare our employees and families receive through a business coalition focusing on the quality and cost-effectiveness of care.
3. Priorities: Community health, affordable and quality health care
4. Role in the stakeholder network:
   - Convene
## Appendix C: City and State Legislation

### Tulsa, OK: State-Level Legislation

<table>
<thead>
<tr>
<th>State Level Legislation</th>
<th>Topic</th>
<th>Dates</th>
<th>Description</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SB 419</strong></td>
<td>Maternal mental health</td>
<td>Passed: Apr. 2019</td>
<td>Hospitals that provide labor and delivery services will be required to provide to new mothers complete information about perinatal mental health disorders, including its symptoms, methods of coping with the illness and treatment resources.</td>
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<tr>
<td></td>
<td></td>
<td>Effective: Nov. 2019</td>
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</tr>
<tr>
<td><strong>SB 1823: Shepherd’s Law</strong></td>
<td>Certification of midwifery practice</td>
<td>Passed: Apr. 2020</td>
<td>Requires a Certified Professional Midwife or Certified Midwife to be licensed by the OK Department of Health; Previously, the state did not have an official entity to oversee the midwifery profession but under SB1823, the State Commissioner of Health is tasked to do so via creation of the Midwifery Advisory Committee.</td>
<td>Noted support from the National Association of Certified Professional Midwives.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Effective: July 2021</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Medicaid Expansion</strong></td>
<td>Insurance coverage</td>
<td>Passed: June 2020</td>
<td>Via ballot wide initiative, OK voters approved expansion of Medicaid eligibility to all adults (19-64 years old) making up to 133% of the Federal Poverty Level.</td>
<td>As of 2019, OK experienced the second highest uninsured rate of all states at 14.3%.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Effective: July 2021</td>
<td></td>
<td>Expansion is expected to provide coverage for approximately 200,000 additional residents, which could expand in the coming year as more and more Oklahomans confront unemployment prompted by COVID-19.</td>
</tr>
</tbody>
</table>
Appendix D: Sources