

# ENHANCING EQUITABLE MATERNAL HEALTH IN GREATER BOSTON

## FRAMEWORK OF COALITION PRINCIPLES





## OVERVIEW

This community-driven Framework of Coalition Principles was created through a collaborative process in which multiple partners, including community members, were brought together to participate in two community advisory board meetings and five design workshops between March-June 2022. The purpose of these meetings and workshops was to co-develop the groundwork for a cross-sectoral coalition to improve health for people navigating pregnancy, childbirth, and transition to parenthood with a particular focus on communities of color in Greater Boston. In the design workshops, participants defined the initial purpose, metrics, and structure of the coalition as a guide to propel future work. This is a living document (not binding) that reflects the design process through which this cross-sectoral coalition's foundation has been formed.



## BRIEF HISTORY OF THE PARTNERSHIP WITH THE BOSTON FOUNDATION (2019-2021)

There is growing national attention to the maternal health crisis in the United States where racial/ethnic inequities persist in which Black and Native individuals experience worse outcomes when compared with white individuals, even after adjusting for socioeconomic factors. Gaps in social support during pregnancy and the first year after childbirth contribute to these inequities in maternal health. Community-based organizations (CBOs) and allied health care and public health organizations address critical gaps in social support but may not be adequately equipped to optimize outcomes. Funded by The Boston Foundation to evaluate the landscape of community-based social support services during the critical window of family building, this partnership launched with The Boston Foundation, Harvard T.H. Chan School of Public Health's Women and Health Initiative, and Ariadne Labs in 2019.

In July 2019  
through  
June 2021,  
we aimed to:

1. Identify gaps in social support services among CBOs for clients of color during pregnancy through one year after childbirth;
2. Identify CBO assets, resources, programs, and expertise;
3. Identify relationships among CBOs in the Greater Boston Area; and
4. Create a solution prototype to address the gaps in social support services.

These four aims were accomplished through data collection and analysis, including surveys and interviews with members from CBOs across multiple sectors. The top gaps in social support during pregnancy and the transition to parenthood were: housing, childcare, and support groups for pregnancy and infant loss. We also found that the health care and mental health sectors were most connected to CBOs in a network analysis of referral pathways. Interviewees cited structural and interpersonal racism in Greater Boston and CBOs, as well as lack of coordination of CBOs as top challenges to providing social support services for clients of color. We published our findings in *Maternal Child Health Journal*. We convened a series of design workshops with individuals from community-based organizations, and identified a solution prototype of a community-based coalition built around a Collective Impact model with a racial equity lens to address gaps in social support services for people navigating pregnancy and first year after childbirth.

<sup>1</sup> A community based organization (CBO) is defined as a nonprofit organization that works at a local level to improve life for residents through advocacy and/or direct service delivery. CBOs may include social service providers, community advocate organizations, civic organizations, and faith-based organizations.





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IT’S NOT PERFORMATIVE.  
EVERYONE WHO IS  
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CHANGE, NOT QUICK,  
TEMPORARY INITIATIVES.”**

—SHE-TARA SMITH



## TRANSITION TO COMMUNITY-BASED BACKBONE ORGANIZATION (2022)

In 2022, we set out to transition the project to a community-based backbone organization through the following aims:

1. Co-design with community members the foundation of a cross-sector coalition focused on addressing gaps in social support during pregnancy and first year after childbirth, and
2. Build capacity with a backbone organization to launch a cross-sector coalition to enhance coordination of community-based social support services for people navigating pregnancy and the transition to parenthood, particularly in communities of color in Greater Boston.

Throughout the grant period, we partnered with community members (e.g. parents), public sector organizations, community-based organizations, and health care delivery systems to create the foundation for a maternal health coalition. Attendees included representation from Black, Indigenous, and People of Color (BIPOC) communities around Boston. The grant activities were organized into three phases: (1) Backbone Identification, (2) Coalition Planning, and (3) Proposal Development.

### Identification of the Backbone Organization

Through review of the literature and key informant interviews with successful collective impact initiatives, we identified key characteristics of an ideal backbone organization: 1) existing trust with communities most impacted by inequities, 2) staff representative of the communities most impacted by inequities, 3) leadership-building capacity, and 4) capacity to coordinate communications, advance work, collect data, and disseminate information.

In March 2022, Vital Village Networks was identified as a strong candidate for the role of the backbone organization due to their significant, longstanding, and authentic connections to the communities they support and work with in Greater Boston. Our team shared this choice with a Community Advisory Board (CAB) made up of community members and community-based organizations. In their role as backbone organization, Vital Village Networks led the following activities:

- Attended weekly meetings with Ariadne staff to collaborate on meeting goals and content
- Helped identify and reach out to possible core partners
- Planned and prepared materials for design workshops including any pre-work, providing ways to engage/connect perspectives to move the work forward
- Facilitated coalition workshops of 10-15 people from varying partner organizations
- Reviewed and provided feedback on the Foundations document

**“THIS COALITION IS GOING TO BE IN PLACE FOR MY CHILDREN TO TURN TO WHEN THEY HAVE CHILDREN. IT MAKES ME FEEL SO WARM INSIDE. I FEEL SAFE AND SECURE WITH THIS COALITION.”**

**—DOLORES COX**

# BUILDING THE FOUNDATION FOR THE MATERNAL HEALTH COALITION THROUGH DESIGN WORKSHOPS

## COMMUNITY ADVISORY BOARD

### CAB Meeting #1

We convened our first CAB meeting in March 2022 to provide guidance on the process for co-designing a maternal health coalition focused on enhancing social support in pregnancy and transition to parenthood. There were 14 individuals who participated, including community members, representatives from public sector organizations (The Boston Public Health Commission, City of Boston, Massachusetts Legislature, Mayor Wu's Office), and representatives from community-based organizations (Vital Village Networks, Resilient Sisterhood Project, Dads365). We asked the CAB for guidance on how Vital Village Networks could successfully take on the role of the coalition backbone organization. CAB attendees discussed the strengths and expectations of a backbone organization, including how they envision the backbone organization facilitating communication and collaboration across coalition members. Attendees proposed additional coalition members and discussed areas for collaboration and amplification of the coalition's work.

### Summary of CAB Meeting #1:

Role of a backbone organization	<ul style="list-style-type: none"><li>• Guide and support other coalition members. The important first areas of focus are developing shared goals and measures.</li><li>• Prioritize relationships in the community and communicate back to community members intermittently.</li><li>• Engage multiple stakeholders and elevate different voices. The organization needs to demonstrate inclusivity, be able to bring different perspectives/experiences together, and encourage engagement/communication across coalition members.</li><li>• Serve advocacy role.</li></ul>
Strengths of an effective backbone organization	<ul style="list-style-type: none"><li>• Valued and respected presence in the community, (historic) connection to the community, neutrality</li><li>• Strong leadership, (financial) stability, organized, responsive, change agents</li><li>• Trust, transparency, diversity, inclusivity, openness to change, ability to follow-up regularly</li><li>• Data infrastructure/knowledge of current data and research</li><li>• Advocacy skills — such as having a media presence to shine light on issues related to maternal health</li><li>• Knowledge about history of racism in Boston, available social support resources</li><li>• User-centered (marginalized groups, patients)</li></ul>
Supports needed for a successful backbone organization	<ul style="list-style-type: none"><li>• Funding/financial stability, not competing for resources with allied organizations</li><li>• Ability to capture data</li><li>• Connections to other organizations and ability to draw upon their support (resources, capacities, data, social supports)</li><li>• System of accountability/feedback plus open lines of communication with coalition members</li><li>• Political support/support from city leadership and government</li><li>• Trust from community members</li><li>• Inclusivity training for staff within backbone organization</li></ul>





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— DOLORES COX

## CAB Meeting #2

We convened our second CAB meeting in June 2022 with 11 participants, including community members, representatives from public sector organizations (the Mayor's Office of Women's Advancement and Massachusetts Caucus of Women Legislators' Birth Justice Task Force), and representatives from community-based organizations (Vital Village Networks, Massachusetts League of Community Health Centers, and Resilient Sisterhood Project). CAB attendees discussed the progress made during the five design workshops, shared reflections, and brainstormed together around:

1. Blindspots in the coalition's priority areas,
2. Recommendations for how the coalition can address these blindspots, and
3. Ways to build momentum for the coalition between this CAB meeting and the coalition's launch.

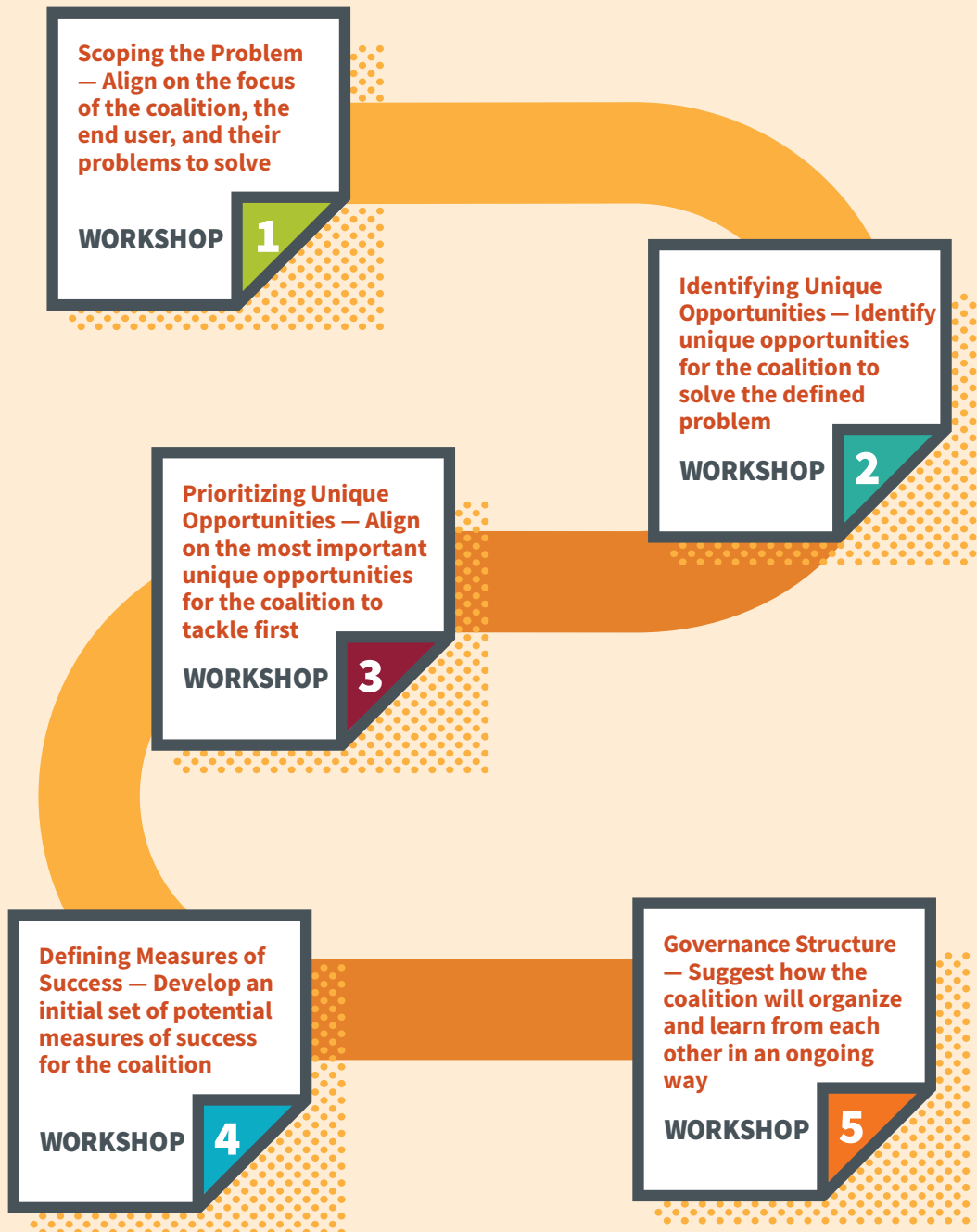
## Summary of CAB Meeting #2:

Blindspots in coalition priority areas	<ul style="list-style-type: none"><li>• <b>Education:</b> Education efforts should include all community players that touch the lives of mothers.</li><li>• <b>Support/Empowerment:</b> Providers/community partners should be involved in asking the right questions and actively supporting their patients/families; Providers should be trained in how to identify and understand traumas (intentional and unintentional) that cannot be seen.</li><li>• <b>Person-centered:</b> All community members and potential stakeholders should be included in crafting the vision for the coalition.</li><li>• Across all priority areas, we need a strategy to ensure member/participant longevity.</li></ul>
How the coalition can address these blindspots	<ul style="list-style-type: none"><li>• Bring many sectors/organizations together in the shared commitment to educating, empowering, and equipping mothers with the information and tools they need to advocate for themselves and effectively engage (in their communities, in their care, etc.).</li><li>• Prioritize initial stakeholder engagement from those who look like the community this coalition serves, and invite potential communities we wish to serve to be more present in future coalition initiatives and gatherings.</li></ul>
How to build momentum between now and coalition launch	<ul style="list-style-type: none"><li>• <b>Communication:</b> Keep the conversation going and 'get the buzz' out to the communities we serve; Be thoughtful in how we communicate so we do not compound existing trauma, but move our work forward with hope, love and support; Coordinate impactful social media messaging and tell the stories of those this coalition seeks to serve in an impactful, visual manner.</li><li>• <b>Collaboration:</b> Align the coalition's vision and objectives with existing maternal health initiatives, and link the coalition launch event to related community events that happen regularly; Host additional gatherings (social events, discussions, town halls, etc.) in partnership with other individuals/groups impacted by this work (CBOs, youth groups, senior centers, etc.).</li><li>• <b>Continuation:</b> Continue to dissect and refine the coalition's SMART goals.</li></ul>



## Design Workshops

From April-June 2022, Vital Village Networks designed and led five virtual design workshops with coalition members. These design workshops were a “trust exercise” — demonstrating not only the feasibility, but the power behind convening a group of community members and representatives from CBOs and public sector organizations to work together toward a common goal and shared foundation for a maternal health coalition. Each workshop was structured to advance our efforts towards this foundation through the following goals:



# COMMUNITY-LED FOUNDATIONAL PRINCIPLES FOR THE COALITION

## WORKSHOP 1

### Mission of the Coalition

The coalition has not established a formal mission statement. However, the design team has developed the following recommendations to guide the mission statement:

The Coalition seeks to ensure safety, dignity, and respect for birthing families through connection to quality care and resources, provision of support and education, and uplifting the voices and lived experiences of those who face disproportionate health challenges and barriers. The Coalition aims to address the major gaps in critical forms of social support and meet the needs of birthing people and their families in Greater Boston, particularly those most affected by maternal health inequities (people identifying as Black, Indigenous, and other minoritized identities).





## Shared Goals & Objectives

This coalition strives to uphold and uplift the dignity of families by addressing the hardships and traumas faced by birthing people and their families in Greater Boston that stem from the profound structural and interpersonal racism permeating CBOs, healthcare settings, and society, at large. Ensuring access to culturally-sensitive care that places dignity, joy, and shared decision-making at the center of health care is a critical goal of the coalition. The ultimate vision is to ensure an equitable and just experience for people planning, preparing for, and welcoming children into their lives.

**To achieve this vision, the coalition seeks to:**

Ensure access to high-quality, culturally-responsive healthcare services (such as mental health and doulas), and create a cohesive referral system that supports holistic, wrap-around care and optimizes health outcomes

Facilitate communication and coordination across existing services, creating a locus of support that can address the diverse needs of birthing people and families

Connect birthing people and their families to the resources (financial, legal, career, childcare) and tangible materials (diapers, formula, breast pumps) necessary to thrive

Educate and empower birthing people and their partners to cultivate self-advocacy and agency in childbirth, and facilitate communal healing by dismantling generational myths and racial biases

Support and promote a career pathway as a doula in order to increase the number of doulas in the Greater Boston area and ensure that birthing families are provided with a doula that is a good fit for them.

This coalition seeks to lead from within, lifting up the individuals, families, and communities in need of support, ensuring that all are seen and heard.

## Backbone Organization

Vital Village Networks, based at Boston Medical Center, is a national collective of diverse change agents and organizations committed to pioneering sustainable approaches to transforming child, family, and community wellbeing. Through a place-based approach, they strive for scalable, sustainable solutions that propel community change around child protection and healthy social and emotional development in early childhood. Vital Village is committed to equity-centered community leadership and collective impact approaches, facilitating collaboration between educators, clinicians, social service providers, legal advocates, and community members to strengthen supports for birthing families in a multitude of ways — prenatal and early childhood education, economic security, preventive legal resources. As a trusted, resourced network with a strong leadership of change-makers, intricately embedded in the Greater Boston communities it serves, Vital Village is uniquely positioned to carry out the essential roles of a backbone organization: Collaborative leadership, provisioning of resources, and coordination of financial resources and funding streams. As an organization committed to inclusivity and uplifting the voices and perspectives of communities in need, Vital Village is notably capable of bringing different perspectives and lived experiences together, thoughtfully and constructively engaging across coalition members. Through dedicated engagement with the community, Vital Village understands what is expected of them as the backbone organization — transparency and accountability, inclusivity and responsiveness, openness to change. They are a respected community-based organization in Greater Boston, as evident in their strong relationships with other maternal-child health organizations and community-centered approach to advancing sustainable social change. [CAB 1 Meeting]



## Shared Measurement Systems

**The design workshop participants identified several outcomes the coalition should aim to improve:**

- Increased access to and utilization of doula services
- Educational opportunities for pregnancy, childbirth, and transition to parenthood
- Increased access to preferred birth locations and options for care — families should have a choice where they give birth and access to a doula, midwife, etc.

Sources from which to collect data include existing data repositories (such as databases from agencies, organizations, and institutions) and from individuals (such as coalition members and key informants). Methods of data collection may include surveys, interviews, case studies, focus groups, testimonials, documents (event logs, maps) and images/media (video, photographs).

**Some evaluation questions for measuring the success of the coalition include:**

- Who did/did not participate?
- What happened? [events/activities]
- Was the coalition's goal accomplished? How is the goal measured?
- What changed for the key audience (people welcoming children into their families): experience, behavior, satisfaction, outcomes?
- What changed for the community: programs, services, policies, practices?



## Organizational Structure

### WORKSHOP 5

**Design workshop participants put forth the following ideas as a foundation for the organizational structure and governance of the coalition:**

- Prioritize voting as the primary method for decision-making, rather than group consensus. Voting reinforces the values and priorities of the coalition — ensuring that all voices are heard and all members are held accountable.
- Reassess goals, priorities, and strategies regularly to ensure the coalition is still progressing towards its established aims.
- Implement a process for community engagement and feedback to ensure the coalition continues to meet the needs of the people it serves.
- Bring in new perspectives — whether that be through membership or a less formal approach (i.e., community meetings) — to the discussions and ensure all decisions are shared back to the community.
- Draw upon individuals' strengths and experiences when allocating roles and responsibilities.
- Create clear membership/job descriptions so that all members are informed of their commitment and can be held accountable.
- Ensure that all voices are heard and that power is shared across all members (individuals and organizations) of the coalition.
- Promote a culture of fluidity, rather than rigidity — institute a process through which new members are brought into the coalition and existing members are cycled through other roles.

## NEXT STEPS AND PATH AHEAD

The design process and future work of this coalition are intended to be community-driven, cross-sectoral, and responsive to the health needs of birthing people and families in Greater Boston, particularly within communities of color. Our goal is to support people planning to, preparing for, and welcoming children into their lives through access to high-quality services, care coordination, education, and resources (financial, legal, career, material). This coalition seeks to advocate for and empower birthing people and families to ensure an equitable and just experience for all. We look forward to continuing to build this coalition with community members and growing the capacity of the coalition in the Fall, beginning with a public town hall in September 2022.



## Core Partners



**Community Members:** Community members from across Greater Boston joined the community advisory board and design workshops. These community members were able to provide the insights and lived experiences of being parents while also contributing their expertise in working with families during pregnancy and childbirth. For example, some community members were practicing doulas and lactation consultants, while others offered their support and guidance to new fathers to ensure that growing families have the support they need.



**Vital Village Networks:** Vital Village Networks, based at Boston Medical Center, builds the capacity of communities to optimize child and family wellbeing, prevent early life adversities, and advance equity through coalition building, collaboration, leadership development, research, data sharing, and advocacy. Vital Village's community of practice mobilizes cross-sector collaborations, encourages collective learning, and cultivates stronger connections between residents and community-based organizations to co-design community systems-improvement efforts and address structural inequities.



**Ariadne Labs:** Ariadne Labs is a joint center for health systems innovation at Brigham and Women's Hospital and the Harvard T.H. Chan School of Public Health. With a mission to save lives and reduce suffering, our vision is that health systems equitably deliver the best possible care for every patient, everywhere, every time. The Delivery Decisions Initiative (DDI) is a research and social impact program with Ariadne Labs focused on transforming childbirth care around the world so that every person can start or grow their family with dignity. DDI has worked in the greater Boston area, supporting maternal health equity for the better part of a decade.



## HARVARD T.H. CHAN SCHOOL OF PUBLIC HEALTH

### Harvard T.H. Chan School of Public Health Women & Health Initiative:

The Women and Health Initiative (W&HI) at the Harvard T. H. Chan School of Public Health recognizes that, due to persistent social and gender inequality around the world, girls and women experience increased risk of ill-health and injustice within the health sector, where they play dual roles as both consumers and providers of health care. The W&HI holistically conceptualizes women as both the beneficiaries of health care interventions and as critical caregivers within the health system. The Initiative is unprecedented in its balanced focus on improving women's health and catalyzing women's contributions to the health and wealth of societies.



**Boston Public Health Commission:** The Boston Public Health Commission (BPHC), the country's oldest health department, is an independent public agency providing a wide range of health services and programs. Within the BPHC, Healthy Baby Healthy Child and the Boston Healthy Start Initiative (BHSI) make up the Healthy Start Systems Division within The Child and Adolescent Family Health Bureau. Healthy Start Systems works to promote the health and well-being of women, children, and families in the City of Boston, particularly those living in communities that are disproportionately impacted by infant mortality and other health disparities. BHSI subcontracts with local health centers to fund a family partner to provide direct support to self-identified black pregnant and parenting women, children and families. It provides care coordination, connection to resources, health education, and advocacy. BHSI provides direct support to pregnant and parenting women, children and families. It provides care coordination, connection to resources, health education, and advocacy.

BHSI also coordinates the Community Action Network (CAN). CAN is a community coalition focused on reducing inequities in infant mortality and poor birth outcomes through policy strategies.



### Massachusetts Department of Public Health (MA DPH)

**Bureau of Family Health and Nutrition:** The MA DPH Bureau of Family Health and Nutrition provides programs and services ensuring the health of the Commonwealth's mothers, infants, children and youth — including children and youth with special health needs and their families. Within the Bureau, the Division of Maternal and Child Health Research and Analysis works to optimize the health of infants, children, mothers, and families in all Massachusetts communities by strengthening partnerships across the state and supporting the translation of data to action.

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## Participants

**Fiona Almeida**

Resilient Sisterhood Project

**Eimaan Anwar**

MotherLab

**Nora Bent**

Massachusetts Caucus of Women Legislators,  
Birth Justice Task Force

**Joyce Clark**

The Birthingheirs Project

**Jessie Colbert**

Mass. PPD Fund

**Keiana Cox**

Community Member

**Dolores Cox**

Community Member

**Bonnell Glass**

The Perinatal-Neonatal Quality Improvement Network  
of Massachusetts

**Becky Cruz-Crosson**

Boston Public Health Commission

**Jallicia Jolly**

Amherst College

**Jessie Laurore**

Neighborhood Birth Center

**Lilly Marcellin**

Resilient Sisterhood Project

**Kristin McSwain**

Office of Mayor Michelle Wu

**Jisca Philippe**

Office of Mayor Michelle Wu

**Yaminah Romulus**

Health Care For All and Birth Equity and Justice Massachusetts

**She-Tara Smith**

The Birth Co.

**Sarah Stone**

Massachusetts Department of Public Health

**Morgan Taylor**

Boston Public Health Commission

**Alexandra Valdez**

Office of Mayor Michelle Wu

**Brandy Watts**

Boston Public Health Commission

## Project Staff

**Ronda Alexander**

Vital Village Networks

**Renée Boynton-Jarrett**

Vital Village Networks

**Amanda DiMeo**

Ariadne Labs

**Ana Langer**

Women & Health Initiative, Harvard T.H. Chan  
School of Public Health

**Rose Molina**

Ariadne Labs

**Lindsey Renner**

Ariadne Labs

**Jonathan Wolinsky**

Ariadne Labs



## Contact us

Vital Village Networks

801 Albany, 2nd Floor, Boston MA 02118

Email: [vitalvillage@bmc.org](mailto:vitalvillage@bmc.org)

Phone: (617) 414-3674



Ariadne Labs is a joint center for health systems innovation at Brigham and Women's Hospital and the Harvard T.H. Chan School of Public Health.

401 Park Dr, 3rd Fl West, Boston MA 02215

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