



THE ANNIE E. CASEY FOUNDATION

B'MORE FOR HEALTHY BABIES

*A Collaborative Funding Model to
Reduce Infant Mortality in Baltimore*

Prepared for the Annie E. Casey Foundation by The Hatcher Group.

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EXECUTIVE SUMMARY

After Baltimore City's infant mortality rate hit a record high in 2009 — 13.5 per 1,000 live births¹ — more than 150 public and private entities came together to launch B'more for Healthy Babies (BHB), a multipronged initiative to improve the health and well-being of families citywide.

At the time, African-American babies in Baltimore City were five times more likely to die before their first birthdays than white infants. The partners involved in BHB — including public agencies, foundations, hospitals, businesses, nonprofit organizations, community groups and city residents — understood that these high infant mortality rates were influenced not only by the care the mother receives during pregnancy or the care the baby receives after birth, but also by the long-term health of the parents, the broader health of the surrounding community and a range of persistent issues, including racism, poverty and inadequate access to quality schools and housing. The collaborative specifically set out to address these disparities and ensure more African-American babies were born healthy, and that their parents had the tools, resources and information they needed to help their families thrive.

After nearly a decade of work, the B'more for Healthy Babies story is an important model of success. The infant mortality rate in the city has decreased by 35 percent,

and the disparity between African-American infant deaths and those of whites has narrowed by 64 percent.² Other outcomes related to infant mortality, including teen births and premature and underweight births, have decreased, while positive outcomes, such as the number of women breastfeeding, have improved.

To achieve population-level change and ensure more equitable outcomes for Baltimore residents, BHB coordinates resources from various funding sources and brings together a range of partners to support individuals, improve services and strengthen citywide policies — an approach often referred to as collective impact.

While the initiative is funded largely with public investments, private-sector contributions from foundations, businesses and nonprofits have also been critically important, helping BHB leverage resources to pay for key elements of the initiative that otherwise would have gone unfunded.

These efforts have included public education campaigns on topics such as safe sleep for infants, the risks of smoking for newborns and teen pregnancy prevention; centralized and improved home-visiting programs for pregnant women and mothers; and collaborations with clinics and hospitals to make contraception more accessible. BHB has worked at the system level to strengthen state and local

THE CASEY FOUNDATION'S ROLE

The Annie E. Casey Foundation has supported many aspects of the B'more for Healthy Babies initiative, through both grant dollars and loaned staff time.

Casey has made major direct financial contributions toward core BHB functions, including community mobilization, communications efforts, public health campaigns, monitoring and evaluation. The Foundation also embedded Gena O'Keefe, a program officer with a background in public health, to co-lead the initiative for several years, helping to coordinate and establish BHB strategies and playing an important role attracting and retaining funders.

In recent years, Casey has provided funding to digitize a paper-based prenatal risk assessment tool, to support BHB's race-equity work, to help BHB secure additional state resources and to develop BHB's community advisory board.

Other major funders in the Baltimore area have since provided their own support, broadening the scope of the partnership.

policies, fostered change within partner organizations to better address systemic challenges and led intensive mobilization efforts in two communities within Baltimore City.

Public health and nonprofit leaders, community organizations and foundations across the nation have looked to the initiative's approach to help shape their own collective efforts. In all, more than 20 cities and states have requested assistance from BHB, on topics including programming, communications and outreach.

Among the lessons the B'more for Healthy Babies initiative has to offer:

- Strong collective impact initiatives combine both public and private funding sources. These arrangements allow for broader, more creative approaches and can lead to increased accountability.
- Private funding can support key elements — including strategic planning processes, communication and outreach campaigns, data collection and staff trainings — that may not be covered by public funding sources but are critical to the success of population-level health campaigns.
- Family engagement efforts, including home visits, educational classes and support groups, must be led by trusted community-based organizations and partners.

- Collective impact initiatives benefit when partners establish common goals and remain transparent about the ways public funding is being used to reach those goals. A clear view of the finances can help illuminate gaps and give private funders insights into how they can support the overall initiative, while fulfilling their own organizational goals.

The Casey Foundation, one of several longtime private funders of BHB, hopes these insights can provide a road map for other public and private entities interested in implementing similar collective impact health initiatives in their communities.

B'MORE FOR HEALTHY BABIES: ADDRESSING A MAJOR PUBLIC HEALTH CHALLENGE

In the mid-2000s, Baltimore City had one of the worst infant mortality rates in the country — especially for black babies, who at one point were eight times more likely to die than white babies.³ Many saw the disparity as a reflection of the deep inequities in health care, education and other resources African Americans in Baltimore face.

For the Baltimore City Health Department, these numbers were a sobering reality: Public health experts internationally use the infant mortality rate as a strong indicator of a population's health and of society's ability to support its

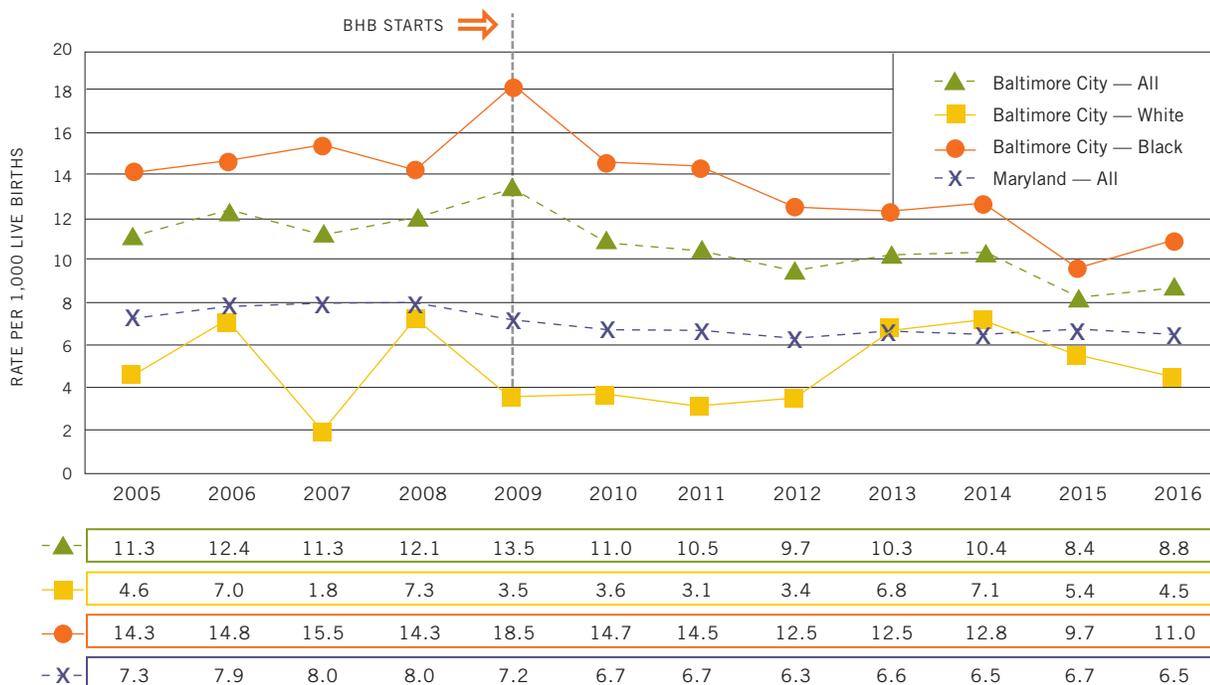
most vulnerable members. It spurred them into action. Until then, the department primarily relied on prenatal and early childhood home-visiting programs — which led to some success at the individual client level but did not translate into progress for the city as a whole.

Struggling to confront the three leading causes of infant mortality — preterm delivery, low birth weight and unsafe sleep — Baltimore health experts carefully

reviewed information about births and infant deaths to identify the most significant contributors to them. In 2008, the health department secured funding from CareFirst BlueCross BlueShield (CareFirst), the leading health insurer in the Baltimore region, to support a strategic planning process to address the crisis.

By the following year, the city’s infant mortality rate had grown to a record high of 13.5 per 1,000 live births. The

INFANT MORTALITY — Baltimore City and Maryland 2005–2016⁴



health department, in partnership with CareFirst and the Family League of Baltimore, released *The Strategy to Improve Birth Outcomes in Baltimore City*,⁵ a publication shaped by city data, scientific literature and input from partners and community members and supported by a robust theory of change. The strategy was multifaceted and aimed to address the many issues related to infant mortality. It was clear that this type of population-level change would require more than just public funding.

Health department officials built on the strategy document to develop a more robust citywide plan. CareFirst saw promise in the initiative and provided a three-year, \$3 million grant to help launch it. (See page 6 for more information about CareFirst's involvement.)

With this investment in place, the city health department was able to secure an additional \$1 million annually in state funding for maternal and child health. These funds — effectively a match to the CareFirst grant — were reallocated in alignment with the overall citywide plan and used to leverage existing funds. This new funding approach would allow the city to act more strategically and demand more accountability from local providers.

The newly branded B'more for Healthy Babies initiative formally launched in 2009, with a focus on building a stronger citywide system of care for pregnant

women, babies and new mothers.

BHB partners established several goals, including reductions in infant mortality and in the three key factors contributing to those deaths. They also established a goal to reduce teen births, another factor that can affect infant mortality rates. The initiative included essential focus areas to achieve these objectives and improve birth outcomes, including greater public education about safe sleep, maternal mental health, drug and alcohol treatment and expanded access to family planning. (See page 5 for more information about BHB's multilevel strategic framework.)

The Baltimore City Health Department became the lead agency for BHB, partnering closely with Family League of Baltimore and another quasi-public nonprofit agency, HealthCare Access Maryland. Beyond making programmatic sense, these partnerships have given the initiative more flexibility to raise and spend private-sector funding over the years. For example, in some cases, funders have preferred to make grants to a nonprofit rather than a government agency.

Among its major accomplishments, BHB upgraded home-visiting programs, in which health care workers provide hands-on support to pregnant women and newborns. All such programs in Baltimore adopted high-quality, evidence-based models and curricula. BHB also instituted a centralized system at HealthCare Access

Maryland to connect eligible women to prenatal care and support services.

Another important element of BHB's success is the citywide public education campaigns it has launched about factors related to infant health. One campaign featured women whose children died as infants and included information about how to ensure babies sleep safely. Videos about safe sleep were distributed to all of the city's birthing hospitals to be viewed by new parents as well as to the city's Circuit Court, where residents serving jury duty watched them. Another campaign focused on reducing maternal and infant exposure to secondhand tobacco smoke and encouraging provider-patient communication about the harmful effects of smoking on babies.

Through a concerted effort including extensive outreach to providers, BHB has expanded affordable and equitable access to contraception for women, including long-acting and reversible methods. Known as U Choose, the campaign supports young people in reproductive life planning and choosing appropriate contraception.

For more information about BHB's strategies and achievements, visit healthybabiesbaltimore.com.

A COLLABORATIVE FUNDING APPROACH

As of 2017, about 95 percent of BHB's \$29 million budget was publicly funded, including a large share of federal funding for direct services for women and children, such as home visits to provide care for pregnant women and new mothers, nutritional services for women and infants and reproductive health services.

BHB has relied on the private sector — foundations, businesses and other entities — to supplement these public dollars, which come with restrictions on how they can be used. Totalling roughly 5 percent of the BHB budget, this private support has funded a range of things, including general infrastructure and management; robust outreach efforts to a wide range of health and social service providers, including doctors and home nurses who have helped share literature and other information; the communications campaigns about safe sleep; and various community engagement efforts that likely would not have been possible otherwise but have proven vital to the initiative's success. The private dollars have also allowed BHB to work extensively in two Baltimore City communities, Patterson Park North & East and Upton/Druid Heights, providing ongoing outreach to connect women to services, supporting new moms' clubs, offering exercise classes and holding community health-focused events.

B'MORE FOR HEALTHY BABIES: MULTILEVEL STRATEGIC FRAMEWORK

POLICY

- *Advocate for fair policies*
- *Standardize practices among partner organizations*

SERVICES

- *Train doctors, nurses, social workers*
- *Improve screening and counseling*

COMMUNITY

- *Increase outreach to pregnant women and families*
- *Provide group programs*

INDIVIDUAL

- *Create education campaigns*
- *Provide one-on-one services*

Since BHB's launch, its leaders have worked to be transparent about their funding structure and needs, and they work with funders to shape grants that are consistent with the citywide strategy while fulfilling each funder's own mission. The steady flow of private funding has given BHB the ability to take a 10,000-foot view of the challenges surrounding infant mortality in Baltimore, strategize about cross-systems approaches and test innovative ideas.

The next section highlights five case studies of how private funders have supported BHB.

CareFirst BlueCross BlueShield

CareFirst traditionally targeted its community investments toward health-related initiatives that expanded general access to health care. In the mid-2000s, it shifted its giving to initiatives that were more catalytic in nature — efforts that had the potential not only to expand access to care but also to improve the underlying system in which care is delivered.

CareFirst saw that kind of promise in Baltimore City's efforts to reduce infant mortality. The company was initially concerned about investing in an initiative largely driven by the local health department. After seeing the strategy document and learning more about the proposed effort, the company eventually

decided that supporting such a promising citywide initiative was a smart investment to improve health care overall.

“It was extraordinary for us. We had never made a commitment of that size to any initiative, let alone one led by government,” says Maria Harris Tildon, senior vice president for public policy and community affairs at CareFirst. “Ultimately, the initiative's level of quality and credibility gave us confidence that it could work.”

CareFirst maintained its \$1 million annual commitment to BHB for five years and remains a significant investor, currently funding the initiative at \$750,000 annually. In total, the company has granted nearly \$9 million to BHB since 2008. The CareFirst grants also proved valuable by helping to attract significant funding from other foundations and businesses.

Johns Hopkins Urban Health Institute

The Johns Hopkins Urban Health Institute, a collaborative initiative in East Baltimore, has provided funding to build the capacity of the BHB community advisory board. The grant, awarded to a Hopkins nurse working with BHB, has supported recruitment of board members and paid for stipends, transportation and food.

Launched in 2017, the advisory board is made up of 14 Baltimore City residents with a wide range of talents, expertise and life experience. The board and BHB staff meet monthly to build a greater sense of community, identify issues that contribute to health disparities and explore all the facets of BHB. With technical assistance from Maryland Nonprofits, the board is drafting a set of guidelines to hold BHB accountable for using race-equity, antiracist and community-driven approaches across all aspects of the initiative, from programming and policy priorities to hiring, purchasing and contracting decisions.

An early success of the board has been the launch of the BHB Community Doula Program, a flourishing partnership between BHB staff and two board members. The program has helped a small group of city residents become certified doulas and is supporting their professional development.

A strong community advisory board ensures that the community's voice is helping to guide BHB's work. Such community collaborations are also fundamentally aligned with the Urban Health Institute's mission in Baltimore.

Baltimore's Promise

Baltimore's Promise, a cradle-to-career initiative that brings together funders,

public officials and nonprofit leaders to work to meet pressing citywide goals, has provided important support to BHB by convening key players, assisting with planning, liaising with public officials and advocating for funding.

The partnership began several years ago when Baltimore's Promise was developing work groups and identified one that would focus on improving outcomes for newborns. At the time, BHB was already established and making important progress. Rather than duplicating their work, Baltimore's Promise and BHB created a joint group that would serve as the steering committee for BHB — a step that aligned the city's key players behind the initiative's work.

"It didn't make sense to create something new, when we had B'more for Healthy Babies already up and running," says Tomi Hiers, former executive director of Baltimore's Promise and the current director of the Casey Foundation's Baltimore Civic Site.

Made up of influential leaders from the public and private sectors, the steering committee largely focused on BHB's long-term sustainability. Baltimore's Promise has advocated for BHB with state officials and contracted with consultants to push for expanded state support. Baltimore's Promise has also coordinated an effort to research and secure additional Medicaid funding for BHB.

PRIVATE FUNDERS

- *The Abell Foundation*
- *The Annie E. Casey Foundation*
- *Barbara Bush Foundation for Family Literacy*
- *CareFirst BlueCross BlueShield*
- *CVS Health*
- *The David and Barbara B. Hirschhorn Foundation*
- *de Beaumont Foundation*
- *The Harry and Jeanette Weinberg Foundation*
- *The Henry and Ruth Blaustein Rosenberg Foundation*
- *Kennedy Krieger Institute*
- *Leonard and Helen R. Stulman Charitable Foundation*
- *Lockhart Vaughan Foundation*
- *March of Dimes*
- *National Association of County and City Health Officials*
- *National Fetal and Infant Mortality Review Program*
- *Quality Health Foundation*
- *The Rosenberg Foundation*
- *Share Our Strength*
- *The Straus Foundation*
- *The United Way of Central Maryland*
- *Wright Family Foundation*
- *The Zanvyl and Isabelle Krieger Fund*

PUBLIC FUNDERS

- *City of Baltimore*
- *Governor's Office for Children*
- *Maryland Community Health Resources Commission*
- *Maryland Department of Health*
- *Maryland State Department of Education*
- *U.S. Substance Abuse and Mental Health Services Administration*
- *U.S. Department of Health and Human Services, Office on Women's Health*
- *U.S. Centers for Disease Control and Prevention*

“Our role has really been to work with local leaders to identify the need and advocate for local funding and state policies that lead to improved outcomes for babies in our city,” says Julia Baez, current Baltimore’s Promise executive director. “We are committed to this work and hope to continue bringing the right local and state partners to the table to think through long-term sustainability for BHB.”

The Zanvyl and Isabelle Krieger Fund

For more than a decade, the Zanvyl and Isabelle Krieger Fund has focused on improving outcomes for Baltimore City families with children from birth to school age, so partnering with BHB was a natural fit. The Krieger Fund has supported BHB’s plans to improve programming for infants and toddlers, including a strategic refresh, and also has provided one-time funding to fill a budgetary gap at the initiative.

The Krieger Fund focuses on advancing the social and emotional well-being of children by promoting strong, early attachment with a primary caregiver. Grants to BHB have supported mindfulness training, including breathing techniques, for staff members in the infants and toddlers program, as well as trainings to support the development of healthy caregiver-child relationships — important components of BHB that could not be paid for with public funds.

Karen Kreisberg, executive director of the Krieger Fund, said programming focused on social and emotional well-being is essential to BHB’s focus on helping families become healthier.

“If children are traumatized, they have a harder time learning even if you put them in classrooms with all the right ingredients. If we’re not aware of and sensitive to a child’s social and emotional needs, we’re missing the boat,” says Kreisberg. “Improving children’s early social and emotional well-being in the context of a family leads to outcomes that in fact can move the needle.”

The Abell Foundation

From the beginning, an important goal of BHB was to strengthen the city’s efforts to reduce teen and unintended pregnancies. The initiative approached several foundations, including the Baltimore-based Abell Foundation, which has a shared interest and supports innovative efforts to solve systemic social problems in Maryland, with a particular emphasis on Baltimore City.

Abell agreed to provide funding for a nonprofit organization, Healthy Teen Network, to develop a plan to reduce teen pregnancies in Baltimore. The plan led to the creation of Baltimore’s Teen Pregnancy Prevention Initiative (TPPI). TPPI soon became part of BHB, where it continued to receive support from Abell and gained funding from several other foundations.

It was unusual for Abell to make grants to a coalition, but, as program officer Terry Staudenmaier points out: “Our interest was in figuring out how we can reduce teen and unintended pregnancy rates in the city — and that seemed to fit in well with what BHB was doing.”

Abell has continued to support pregnancy prevention efforts within BHB, with a renewed focus on improving equity of access to contraception. In 2015, the foundation awarded \$288,000 over two years to BHB’s multipronged effort to improve access to long-acting contraception. The work has included connecting with health clinics to educate them about long-acting contraception, help them improve customer service and make sure they know how to get Medicaid reimbursement for the contraception. Abell also provided a one-time grant in 2016 to fill a major public funding gap related to coordinating care for low-income families.

“It’s been really helpful having the structure of BHB to move forward some of the work around contraception access and TPPI,” Staudenmaier says. “We were able to build on the foundation they already had.”

RESULTS

The B’more for Healthy Babies initiative’s citywide strategy touches the lives of thousands of women and families each year, connecting them to the support and services they need to raise healthy babies and thrive. By developing strong working partnerships and new procedures and policies, the initiative has played a critical role in strengthening health care and other services for low-income pregnant women, new parents and babies. Among its efforts, BHB has:

- worked to have all the city’s birthing hospitals offer standard postpartum safe-sleep education prior to discharge;
- established a policy to provide free portable cribs to parents who need them;
- developed a centralized triage system to connect women to home-visiting programs and prenatal care; and
- worked with hospitals and health centers to have them offer the full range of contraceptive methods to all patients.

This multipronged approach has led to significant progress in reaching BHB’s main goals. From 2009 to 2016, the city saw improved outcomes as follows:⁶

- a 35-percent decrease in infant mortality
- a 64-percent decrease in the black-white disparity in infant mortality

“Baltimore City’s collective impact strategy for maternal and child health, B’more for Healthy Babies, has reduced infant mortality citywide by nearly 40 percent in seven years. This public-private partnership would not have been possible without the generous support from and thought leadership of private foundations like the Annie E. Casey Foundation, who are key partners in our efforts to support the health and wellness of women and children across the city.”

— Dr. Leana Wen, Baltimore City Health Commissioner

- a 49-percent decrease in the teen birth rate
- a 75-percent decrease in the black-white disparity in the teen birth rate
- a 71-percent decrease in sleep-related infant deaths

Baltimore City to repurpose some public funds and use them more strategically.

- Collective impact initiatives benefit from establishing common goals and being transparent about how public funding is being used to reach those goals. A clear view of the finances gives private funders insights into how their support can make a difference within the overall initiative.

LESSONS

B'more for Healthy Babies has drawn support from a range of funding partners to strengthen citywide systems and achieve results for Baltimore's children and parents. The initiative is structured to allow funders to support it in different ways — fulfilling each organization's goals and helping to increase the impact of public funding.

BHB partners offered several lessons about funding collective impact initiatives:

- Strong collective impact initiatives must rely on public-private funding models. While public funding is essential to population-level public health campaigns, combining public dollars with private funding allows for broader, more creative approaches and can lead to increased accountability.
- Private funders can play a key role in shaping and moving a community or public agenda. For example, private funding from CareFirst helped enable

- Private support can pay for activities that otherwise would go unfunded, including key campaign elements such as planning, communications, data collection and advertising, as well as additional staff positions. Some funders can even loan staff to plan and support ongoing initiatives.

- Private funding allows collective impact initiatives to take a more strategic, big-picture view of their work.

- Private funding can support community engagement through convenings, training and stipends to participants. It can also cover important basic expenses like food and transportation to encourage community participation.

- While it is important for collective impact initiatives to pursue expanded funding from public sources such as Medicaid, they will not cover the full costs. Long-term funding is often a critical challenge, and it's important to develop robust public-private partnerships to fill gaps and maximize

impact, as well as a strong policy and advocacy strategy to ensure these funding streams are sustainable.

In addition to funding approaches, BHB partners shared several important considerations for initiating and sustaining effective cross-sector collaborations:

- No one entity — government agency, hospital, philanthropic organization or nonprofit — can do this work in isolation. Population-level change requires partnership among residents and the private and public sectors. Developing these relationships takes time and may require organizations to realign their individual goals and priorities to support the initiative's overarching mission.
- Explicitly named and agreed-upon partnership principles can support authentic engagement and buy-in and shared decision making among partners.
- Family engagement efforts, including home visits, educational classes and support groups, must be led by trusted community-based organizations and partners.
- Adopting an explicit focus on racial equity is critical. Addressing racial disparities in health, or in any other sector, requires a deep understanding of underlying systemic and historical factors.

B'more for Healthy Babies is a successful example of the power of public-private partnerships. Through strategic and transparent financing plans, the initiative has resulted in a range of positive changes for the health and well-being of children and families throughout Baltimore City. The Casey Foundation hopes these lessons are useful to other organizations considering similar collective impact initiatives in their communities.

Endnotes

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- 6 Baltimore City Health Department analysis of 2009–2016 data from the Baltimore City Child Fatality Review Team. For more information, visit <http://healthybabiesbaltimore.com/our-initiatives/child-fatality-review>.

Acknowledgments

The Casey Foundation would like to thank those whose insights informed this report:

Julia Baez, Baltimore's Promise

Brooke Hisle, The Zanvyl and Isabelle Krieger Fund

Karen Kreisberg, The Zanvyl and Isabelle Krieger Fund

Joshua Sharfstein, Johns Hopkins Bloomberg School of Public Health

Terry Staudenmaier, The Abell Foundation

Maria Harris Tildon, CareFirst BlueCross BlueShield

Julie Wagner, CareFirst BlueCross BlueShield

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