

BARRIER TO CHANGE:

→ **Belief among decision makers that it is not critical to invest in workforce, anti-racism, or service gaps.**

This document describes actions from the [Birth Equity Action Map](#) that can influence mental models among decision makers related to the value of investing in strengthening the workforce, anti-racist approaches, and/or access to services. This was identified as a barrier to change using the [Iceberg Model of Systems Thinking](#). Click [here](#) to view these actions in the interactive Birth Equity Action Map.



ACTION



DESCRIPTION



RESPONSIBLE SYSTEM ACTORS

ACTION	DESCRIPTION	RESPONSIBLE SYSTEM ACTORS
<p>Activate birth equity champions to influence policy^{3,4,5}</p>	<p>Identify, inform, and activate champions who can influence legislators to direct funds where they need to go to support birth equity. Specifically, this might look like:</p> <ul style="list-style-type: none"> • Providing leadership and communication training to health department staff, community members, health care providers, doulas, and community health workers to advocate for equitable policies at the local/state level • Using targeted messaging to transform mental models among policy and decision-makers • Creating and supporting dedicated spaces to bring community voices and experiences to policymakers and legislative staff 	<p>State and local health agencies, Community-based organization, National non-profits, Federal agencies, Private funders</p>
<p>Address biases system-wide and advance cultural humility^{1,3}</p>	<p>Enhance commitment, create accountability for, and support the practice of cultural humility and awareness/improvement of workforce biases. Specifically, this might look like:</p> <ul style="list-style-type: none"> • Provide health care staff and providers with education on cultural humility and birth equity to grow their empathy and understanding of the need for equitable, trauma-informed, culturally competent care. • Recognize and raise awareness of learning and action opportunities available (i.e., the Racial Equity Institute) to organizations • Inform and activate leadership champions to communicate the need for cultural humility to providers and health care staff, including stories from people with lived experience 	<p>State and local health agencies, National non-profits, Federal agencies, Private funders, Health systems, Hospitals, Academic institution, Birth equity advocates</p>

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<p>Engage and compensate people with lived experience^{2,3,4}</p>	<p>Recognize and create a structure for compensating the invaluable insights gathered from people with lived experience. Specifically, this might look like developing a mechanism to pay people with lived experience for serving on advisory boards or revising job descriptions to recognize lived experience as relevant job experience.</p>	<p>State and local health agencies, Community-based organizations, National non-profits, Health systems, Hospitals</p>
<p>Increase diverse labor and delivery care access^{1,3,4}</p>	<p>Collaborate and innovate to increase access to diverse labor and delivery care (including birth centers) and connections/referrals between labor and delivery and other health care (e.g., emergency departments) and social services (e.g., transportation) to improve patient care and outcomes.</p>	<p>Health systems, Legislators</p>
<p>Listen to and fund community-driven initiatives³</p>	<p>Listen to the community and fund community-defined needs and initiatives (e.g., through authentic, community-driven needs assessments, participatory grantmaking mechanisms, etc.). Specifically, this might look like:</p> <ul style="list-style-type: none"> ▪ Ensuring policies and incentives that support the centering of diverse community-led partners (e.g., representing different demographics and lived experiences, focus areas, organizational sizes, years of operation, etc.). ▪ Expanding possible grantees through networking and inviting community-led organizations that may have been historically overlooked or underrepresented to the table 	<p>State and local health agencies, Federal agencies, Private funders</p>
<p>Provide cultural humility education to policymakers³</p>	<p>Provider policymakers and legislative staff with education on cultural humility and birth equity to grow their empathy and understanding of the need for equitable policies and inform their policy action.</p>	<p>Community-based organizations, National non-profits</p>

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Sources

Actions were synthesized from a two-part Systems Mapping to Advance Birth Equity workshop with 48 diverse actors representing federal, state, local, community, and family birth equity partners as well as the following recommended recent sources that have called for specific actions to advance birth equity.

1. Black Mamas Matter Alliance (2023). Black Mamas Matter: In Policy and Practice: A policy agenda for the Black maternal health, rights, and justice movement.
2. Institute for Medicaid Innovation (2023). Innovation in Perinatal and Child Health in Medicaid.
3. National Birth Equity Systems Mapping Workshop (2023). AMCHP Virtual Workshop, May and June 2023.
4. National Partnership for Women and Families (2023). Raising the Bar for Maternal Health Equity and Excellence.
5. New Jersey Health Care Quality Institute and The Burke Foundation (2022). Delivering Better Care: Midwifery Practice in New Jersey.

Participating Organizations (in the workshop or feedback sessions)

- Alliance for Early Success
- Birthing Cultural Rigor, LLC
- BirthMatters
- Black Mamas ATX
- CityMatCH
- Family Solutions: A Program of the SC Office of Rural Health
- Funders for Birth Justice and Equity
- Georgetown University Center for Children and Families
- Giving Austin Labor Support
- Greater Newark Health Care Coalition
- Hand to Hold
- Healthy Mothers, Healthy Babies Coalition of Georgia
- HRSA's Maternal and Child Health Bureau
- Institute for Women and Ethnic Studies
- Intermountain Health RMOMS Program
- Mama Sana Vibrant Woman
- Mamatoto Village
- March of Dimes
- Maternal Health Equity Collaborative
- Maternal Mental Health Leadership Alliance
- Merck for Mothers
- Minnesota Indian Women's Resource Center
- National Healthy Start Association
- National Institute for Children's Health Quality
- National Partnership for Women & Families
- Our Journ3i
- Philadelphia Department of Public Health
- Preeclampsia Foundation
- Rhode Island Department of Health
- Sedgwick County Health Department
- St. Joseph County Department of Health
- Starting Out Right
- The BEE Collective
- The Reilly Group
- Trenton Health Team
- The U.S. Department of Agriculture
- U.S. Department of Labor
- Utah Pacific Islander Health Coalition
- University of Washington's Parent-Child Assistance Program

